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ABSTRACT

This report is addressed to Comprehensive Employment and Training Act (CETA) sponsors to familiarize them with the issues concerning adolescent pregnancy, highlight innovative approaches in working with young parents, and offer suggestions on how to reach and serve young parents with CETA. The report focuses on the problems of young parents, both male and female, married and unmarried, and under age 22, paralleling CETA youth program eligibility. However, young mothers receive more attention because little is known about the needs and problems of young fathers. The report provides an historical background of services to young people, a description of service delivery at the local level, and strategies for improving these services. An overview of CETA outlines the program's role and centers on the CETA programs available to young parents. Appendices include: (1) selected statistics on pregnancy related issues and young parents' participation in CETA programs; (2) case studies from CETA programs in Baltimore, Maryland, Albuquerque-Bernalillo County, New Mexico, and Mid-Willamette Valley, Oregon; (3) information for counselors; (4) interviews with selected experts; and (5) recommended publications and films. (Author/APM)

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Improving Services to Young Parents through CETA

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U.S. Department of Labor
Ray Marshall, Secretary

Employment and Training Administration
Ernest G. Green
Assistant Secretary for Employment and Training
1980

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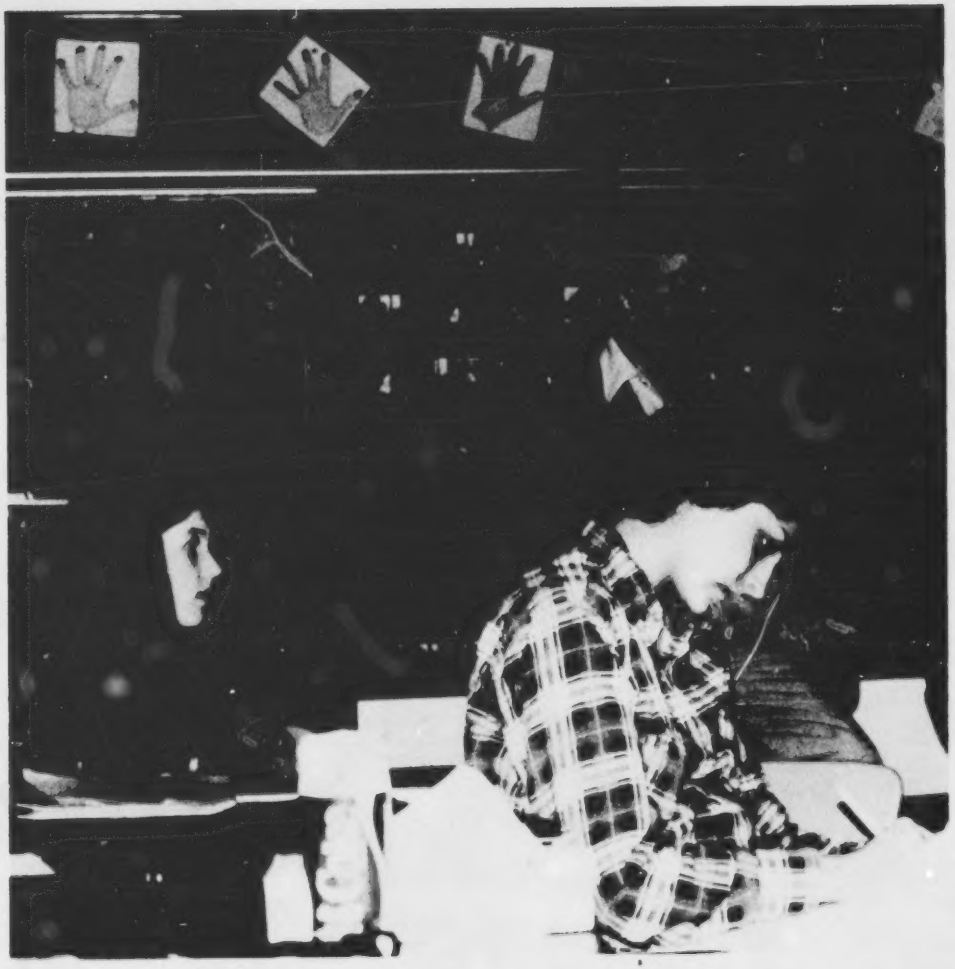

Preface

This report was prepared by the National Association of Counties Research, Inc. under contract number 99-8-1485-33-10 with the Office of Youth Programs of the Employment and Training Administration, U.S. Department of Labor. Organizations undertaking such projects under government sponsorship are encouraged to state their findings and express their judgments freely. Therefore, points of view or opinions stated do not necessarily represent the official position of the Department of Labor.

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Cover photos courtesy of New Futures School, Albuquerque, N.M. and Mayor's Office of Manpower Resources, Baltimore, Md.

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Introduction

Since the Comprehensive Employment and Training Act (CETA) was initiated in 1973, prime sponsors have emphasized services to young people. In fact, in fiscal 1978 and 1979 nearly two-thirds of those who joined the CETA rolls were young people under the age of 22.* Many prime sponsors explain this as an attempt to serve people at a point in their lives where it will make the biggest difference.

In the past, pregnant adolescents and young parents have seldom been identified as a target group for CETA programs. Yet the employment handicaps stemming from adolescent pregnancy and parenthood are hardly a matter of debate. There is compelling evidence that early childbearing leads to a failure to complete high school, early repeat pregnancies and long-term welfare dependence. The fastest growing group in the welfare population is teen mothers. Researchers at the Stanford Research Institute estimate that the 600,000 births to teenagers each year may cost federal, state and local governments as much as $8.3 billion** a year in welfare and medical costs.[1]

Community agencies have provided services to young parents for years, but the problems have not diminished, and national attention has focused on CETA as a vehicle for improving services. In a recent reallocation of youth funds, the Department of Labor's Office of Youth Programs ranked young single parents as its highest priority target group. The Youth Act of 1980, the Administration's proposed youth legislation introduced to Congress in early March, reflects this priority by providing the Secretary of Labor with the authority to exempt pregnant teenagers and teenage mothers from CETA income eligibility requirements.

Prime sponsors can significantly improve the young parent's employment prospects, but there are limits to what they can do on their own. CETA is primarily designed to meet employment and training needs; therefore, it is not structured to respond to some of the more intense support service needs of young parents.

Often, little money is available for support services such as child care and health care once the vital line items such as wages and allowances, fringe benefits and training costs are accounted for in a prime sponsor's basic grant. The provision of support services means less money available for employment and training positions. Improving CETA services to young parents could mean some changes in the way prime sponsors "do business" at the local level and could

*Data from the Continuous Longitudinal Manpower Survey shows that of the 2.4 million new CETA enrollees in fiscal 1978, 1.6 million or 66 percent were under the age of 22. In Titles II and IV, 1.3 million signed up for specific youth-oriented programs, and another 300,000 participated in adult-oriented public service jobs and training programs.

Department of Labor participant characteristic reports for fiscal 1979 indicate that roughly 60 percent of the total 3.3 million CETA participants (Titles II-A,B,C, II-D, VI, YETP, YCCIP and SYP) were under the age of 22. Excluding summer youth program participants, youth accounted for 47 percent of the total participants in fiscal 1979; 407,713 were enrolled in year-round youth programs and 759,521 youth under age 22 were enrolled in adult-oriented training and public service employment programs.

**Based on present net value, each year the 600,000 births to teenage mothers incurs an obligation of $8 billion in governmental expenditures for that birth cohort over a 20-year period.

Photo courtesy New Futures School, Albuquerque, N.M.

require new relationships and agreements with state and local organizations and agencies.

This report will familiarize prime sponsors with the issues concerning adolescent pregnancy and parenthood, highlight innovative approaches in working with young parents and offer suggestions on how to reach and serve young parents with CETA.

Finally, a note on the term "young parent." The report focuses primarily on young parents, both male and female, married and unmarried, and under age 22, paralleling CETA youth program eligibility. Young mothers, however, receive more attention since very little is known about the unique needs and problems of young fathers. Only recently, programs for young parents have begun to deal with the young father. Throughout, there are references to teenage or adolescent parents. This is because much of the data collected refer to 15- to 19-year-old youths, and related policies and programs are, for the most part, directed toward teenagers. Generally, it is the youngest parent who faces the greatest risks.

Adolescent Pregnancy and Parenthood: A National Concern

The figures are shocking. The United States has the highest teenage birth rate of any industrialized nation in the world. In 1980, over one million or roughly one-tenth of all female American teenagers will become pregnant; 600,000 of these young women will give birth and about 400,000 will have abortions. Nearly one-fifth of all births will be to teenage mothers. Of the one million pregnant teens, 400,000 will be 17 or under; 30,000 will be 14 or younger.[2]

The very young face the greatest risks. In contrast to declining fertility for older teenagers and women in general, childbearing continues to increase for adolescents under 17.[3] In the last decade, the birth rate among 17 to 19 year olds declined substantially while the rate for 10 to 14 year olds increased by about 25 percent.

Ten years ago, nine out of 10 babies born out of wedlock to teenagers were given up for adoption. Today, the reverse is true: nine out of 10 young women keep their babies.

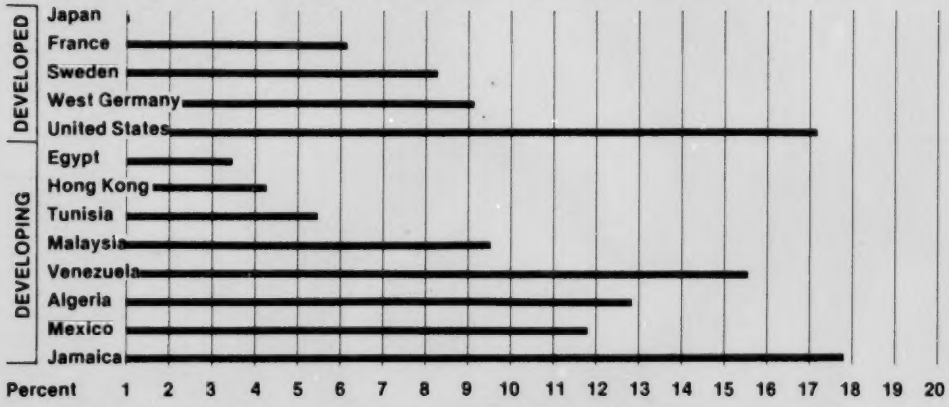
Sexual activity among teenagers is no secret. The Alan Guttmacher Institute estimates that 11 million teenagers are sexually active. One-fifth of the eight million 13- and 14-year-old youths are believed to have had intercourse.[4] Only 30 percent of sexually active teenage women use contraceptives in all instances of sexual intercourse, while 42 percent do occasionally and 25 percent never use contraception.

For many, the birth of a baby offers much joy and hope for the future. For the teenager, it also often marks the beginning of a dismal future of unemployment, poverty, welfare dependence and health complications for mother and child. Education is usually disrupted: pregnancy is the largest single cause of dropping out. Eighty percent of the young women who become mothers by age 17 never complete high school; 90 percent of mothers 15 or younger drop out of school and 40 percent quit before completing the eighth grade.[5] The employment prospects for those who leave school are greatly damaged. The annual earnings of a woman who has her first child at age 15 or below are roughly 30 percent less than the earnings of a woman who has her first child at age 20.[6]

Since research has established a direct relationship between level of educational attainment and success in the labor market, it is not surprising that many young mothers are dependent on welfare for economic support. For example, in 1975, about half of all mothers in families receiving Aid to Families with Dependent Children (AFDC) were women who had their first child during adolescence, costing taxpayers $4.65 billion.[7] Teen mothers are the fastest growing group in the welfare population. Currently, more than 300,000 welfare mothers are teenagers.[8]

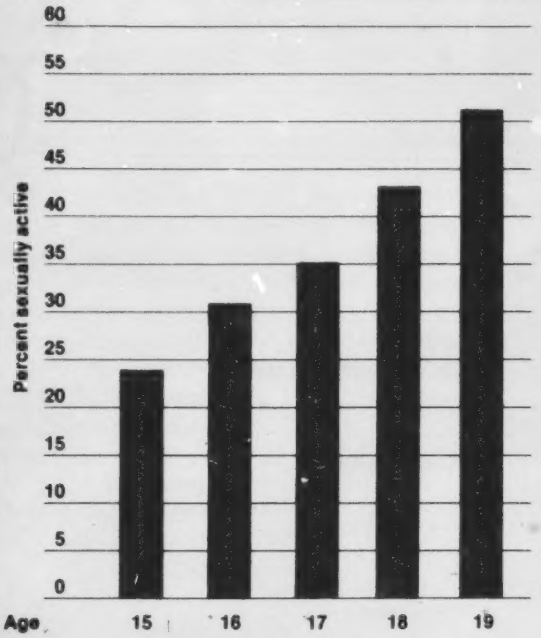
Teenage pregnancy poses serious health risks for young mothers and their babies, particularly for the

Table 1
Percent of Total Live Births to Women Aged 15-19 for Selected Countries



Source: United Nations Demographic Yearbook, 1972, reported in Draper World Population Fund Report, Autumn, 1975.

Table 2
Percent of 15-19-year-old females, sexually active, by single years of age, United States, 1974-75



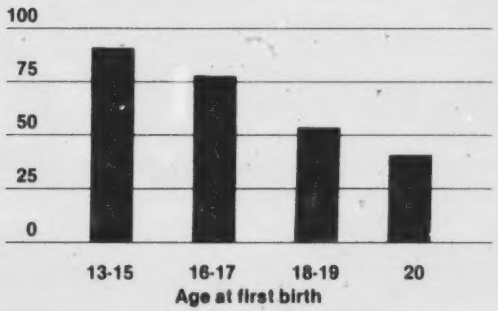
Source: J.G. Dryfoos, "Women Who Need and Receive Family Planning Services at Mid-Decade," Family Planning Perspectives, 7:172; 1975.

younger mothers. Half of the 15- to 17-year-old pregnant teenagers receive no prenatal care until the second trimester of their pregnancy. Six percent of teenagers under 15 receive no prenatal care at all. Complications during pregnancy and birth are more likely and both infant and maternal mortality rates are higher. For example, infant mortality is twice as likely when the mother is 16 years old compared to mothers 20 to 35 years old.[9]

Furthermore, almost one-quarter of the women who have their first child in their teens will have three or more children during the following seven-year period. Eighteen percent will become pregnant again six months after birth, 44 percent within one year and 70 percent within two years.[10]

Early pregnancy and early marriage at times go together. While much attention has been focused on the problems of young, single parents, research and practical experience show that young, married parents have as many difficulties as young, single parents, if not more. Marriage does not alleviate labor-market problems caused by lack of education, training or work experience. Frequently, the young father is a school dropout with few skills. It is even more likely that the mother will drop out of school and will become pregnant again as a teenager if she gets married. Since nearly 50

Table 3
Percent of Teenage Mothers Not Completing High School



Source: L.A. Bacon, "Early Motherhood, Accelerated Role Transition and Social Pathology," *Social Forces*, March 1974, Table 3

percent of teenage marriages end in divorce, it is probable that she will spend some time as head of a family.

Thus, lack of education, lack of employability skills, welfare dependency, health and family problems greatly reduce both single and married young parents' chances in the labor market. Yet, the same studies that have generated the depressing statistics also indicate that, if comprehensive services are provided, young parents' prospects may be greatly improved. The data show that limiting or postponing additional childbearing will have a positive effect. That decision, however, is a matter of individual choice. The CETA law specifically states that acceptance of family planning services shall be voluntary and not a prerequisite of any CETA program (Section 121[3]).

Historical Background of Services to Young Parents

The plight of young parents began to receive national attention in the early 1960s as obstetricians and pediatricians began documenting the problems of early pregnancy and childbearing. Federal involvement began in 1962 when the Children's Bureau of the Department of Health, Education and Welfare (HEW) funded a demonstration program at the Webster School in Washington, D.C. The project combined a special school program with health and social services. Hence, the concept of comprehensive services* originated. The Webster Project's success led to its replication throughout the country.

To distribute research findings and information from the various community efforts, the Cyesis Consortium, later the Consortium on Early Childbearing and Childrearing, was set up in Washington, D.C. in the late 1960s. In 1969, a national membership organization, the National Alliance Concerned with School-Age Parents, was founded to provide technical assistance to service providers and advocate for the interests of young parents. By this time, a large body of research and practical experience documented the necessity for comprehensive and well-coordinated services to address the needs of young parents adequately.

In 1971, Elliot Richardson, then HEW secretary, established the Inter-Agency Task Force on Comprehensive Programs for School-Age Parents, with the U.S. Office of Education as the lead agency. The task force sought to encourage the provision of comprehensive services to young parents and their infants. Formation of young parents' programs gained momentum in the early 1970s with the implementation of regulations issued under Title IX of the Education Amendments of 1972, which forbade schools receiving federal funds to discriminate against or exclude students based on pregnancy or parenthood. Previously, pregnant students were often expelled or placed in homebound programs to prevent their contact with other students.

By 1973, there were an estimated 250 comprehensive programs nationwide serving pregnant adolescents and young parents. In 1975, the Office of Education compiled a directory listing more than 650 programs. Few programs, however, offered day care, birth control, services to young fathers or employment-related services.

*Comprehensive services for young parents usually refers to services in four categories: health, education, social services and child care. Recently, however, many practitioners have included an employment component as part of their comprehensive programs.

*Every OAPP grantee must provide several core services which include pregnancy testing and counseling; family planning services; pre- and postnatal care; nutrition counseling; referral for venereal disease treatment; referral for pediatric care; sex education; referral for appropriate vocational, educational and health services, and adoption counseling. Most prime sponsors are not equipped to provide all of these required services. However, projects that serve as a broker of services, providing directly only those services unavailable elsewhere, are eligible for OAPP funding. Programs may be funded for up to five years, with a decreasing federal share each successive year.

In 1977, then Secretary Joseph Califano convened a new task force within HEW to develop legislative and administrative recommendations on adolescent pregnancy. The Administration's bill, the Health Services and Pregnancy Prevention and Care Act of 1978, was introduced in the Senate by Sen. Edward Kennedy (D-Mass.) and a companion bill was introduced in the House by Reps. Paul Rogers (D-Fla.) and John Brademas (D-Ind.). A general consensus supporting a comprehensive approach to services emerged from the hearings on the bill. The legislation was passed in October 1978 as Titles VI, VII, and VIII of the Health Services and Centers Amendments of 1978.

As a result of the new legislation, described by Secretary Califano as "the centerpiece of President Carter's strategy to deal with the urgent problem of teenage pregnancy," an Office of Adolescent Pregnancy Programs was created within HEW (now the Department of Health and Human Services) to coordinate federal efforts for pregnant adolescents and adolescent parents. Title VI provides grants to public and private nonprofit organizations and agencies which deliver or coordinate the provision of comprehensive services. Title VII calls for coordination of all federal programs and policies. Title VIII authorizes an independent study to evaluate existing programs and services.

Although authorized at $50 million for fiscal 1979 and $65 million in fiscal 1980, the Office of Adolescent Pregnancy Programs (OAPP) received a supplemental appropriation of only $1 million in fiscal 1979. The Administration initially requested an appropriation of $17.5 million in fiscal 1980, which was reduced to $8.84 million in a late round of budget cuts early in 1980. The Administration's request for fiscal 1981 is also $8.84 million. Congress slashed the President's appropriation request for OAPP in fiscal 1980 even further, to $7.5 million. Congressional action on OAPP's fiscal 1981 appropriation may follow a similar pattern.

Selecting from over 210 grant proposals, OAPP funded only four programs in fiscal 1979. By the April 15, 1980 deadline for receipt of applications for the fiscal 1980 grant competition, OAPP had received almost 400 proposals. Originally, OAPP planned to fund about 50 projects serving close to 16,000 adolescents. It is unclear to what extent the unexpected budget cuts will diminish initial plans. Although CETA prime sponsors are technically eligible to apply for funds, no prime sponosrs have submitted proposals to OAPP.*

Service Delivery on the Local Level

For years, traditional social services agencies such as the Booth-Salvation Army Homes, Florence Crittendon agencies and Catholic Charities have provided temporary refuge for unwed pregnant women (usually white and middle class) who were forced to leave their homes to have their babies. Usually, the mother gave up her child for adoption before returning to the community. In contrast, most poor and minority young women kept their babies and relied on the resources of their families. These agencies still play a major role in serving pregnant adolescents and young parents but have shifted their emphasis as societal attitudes toward pregnancy have changed and most young women, of all races and classes, now decide to keep their babies. Many now provide a range of services to clients from all income brackets.

The scope and variety of services available varies from community to community. Over the past decade the number of programs for young parents has risen dramatically. Often schools, local churches, voluntary agencies, hospital and public health, welfare and social service agencies provide services to pregnant adolescents and young parents. Most of them, however, provide only limited services; few work with young fathers or deal with the young mother's needs in a coordinated manner.

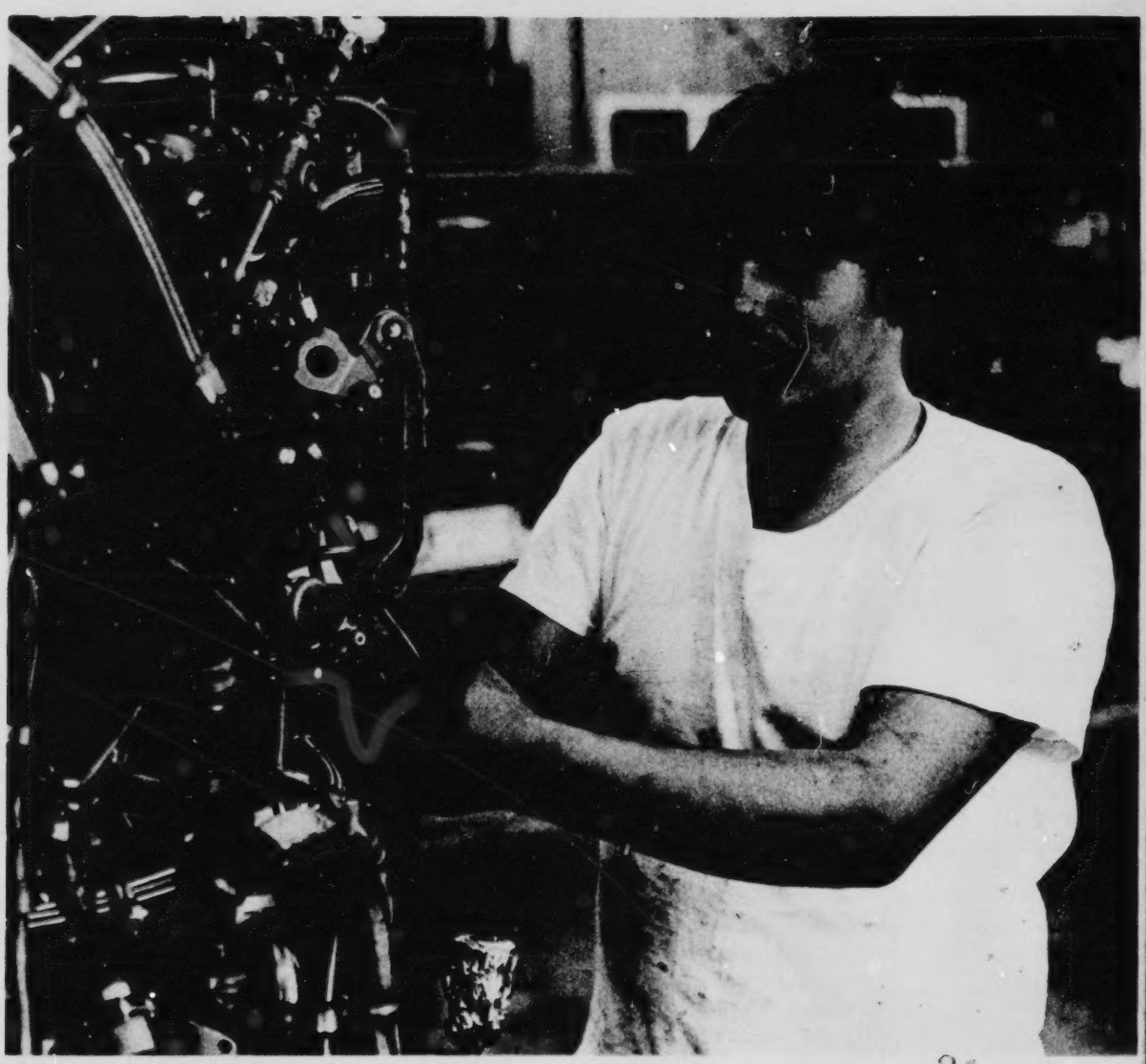
A recent study which assessed available services in Boston, Massachusetts, found that, while counseling was the most common service provided, the young parents themselves reported that they are most in need of concrete help such as financial aid, food, clothing, medical care, child care, housing, job training and job placement.[11]

Funding of services for young parents is often erratic and unreliable. Programs providing comprehensive services usually rely on several sources including federal, state and local government, private corporations, nonprofit foundations, school systems,

client fees, social service and volunteer agencies.

The federal government is, of course, one of the most significant sources of support for services for pregnant adolescents and young parents. Federal programs vary from those directly operated at the federal level to those which are administered through state departments of education, social services and health. Depending on the specific program, funds may be granted on a formula basis or through grants in response to proposals.[12]

The most commonly used federal funds are: Title XX of the Social Security Act (funds day care, family counseling, supportive services and family planning); Title X of the Public Health Service Act (family planning services); Elementary and Secondary School Education Act (remedial and alternative education) and the Vocational Education Act (consumer and homemaking education). (For more information on related federal programs, see Appendix G.)



An Overview of CETA Programs

The Comprehensive Employment and Training Act of 1973 (CETA) was enacted to provide decentralized job training and employment services leading to increased employment opportunities and self-sufficiency for disadvantaged, unemployed and underemployed persons. The CETA amendments of 1978 reauthorized and expanded programs for an additional two to four years.

Although Title IV of the act is a separate youth title, young people may also be served under comprehensive services (Title II-B), upgrading and retraining (II-C), national programs (III), public service employment (II-D and VI), and the Young Adult Conservation Corps (VIII). Besides regular Title IV services to youth, prime sponsors are required to maintain a level of service to youth under Title II-B which is equal to or greater than the level prior to the enactment of the Youth Employment and Demonstration Projects Act of 1977 (YEDPA, included as Title IV-A of CETA).

Serving youth has been, and remains, a local priority under CETA. In fact, in fiscal 1979, 47 percent of all CETA participants, exclusive of summer youth, were under 22; 60 percent were under 22 if the summer participants are counted. Along with this overall emphasis on youth, prime sponsors have always attempted to serve those most in need and are increasing their focus on "high-risk" youth or youth with special needs.

It is possible that programs for young pregnant women or youth who are parents could be provided through any of the titles for which the youth are eligible. The programs that work best depend on the mix of services available in a particular prime sponsor area. Listed below are eligibility requirements and allowable services for each title.

Program	Eligibility	Allowable Services
Title II-B, "Services for the Economically Disadvantaged"	Economically disadvantaged and either unemployed, underemployed or in school.	Comprehensive services including, but not limited to: job search assistance; education and institutional skill training; on-the-job training; work experience; and supportive services (including health care and child care).
Title II-C "Upgrading and Retraining"	Upgrading is for individuals operating at less than their full skill potential, primarily those in entry-level positions or positions with little normal advancement opportunity. Retraining is for individuals who have received notice of layoff and have little chance to be reemployed in the same occupation or skill level.	Financial assistance to private and public employers for the costs of occupational upgrading or retraining programs, including supportive services.
Title II-D, "Transitional Employment Opportunities for the Economically Disadvantaged"	Unemployed at least 15 weeks and either economically disadvantaged or receiving AFDC or SSI.	Entry-level jobs in public service, training and supportive services designed to lead to unsubsidized employment.
Title III, "Special Federal Responsibilities"	Varies	Services and employment and training programs to persons, including women and youth, facing particular

Program	Eligibility	Allowable Services
		employment-related disadvantages. Administered from the national level; includes discretionary funding of programs.
Title IV-A, Subpart 1, "Youth Incentive Entitlement Pilot Projects"	Economically disadvantaged, ages 16 to 19, and in school.	Demonstration projects awarded to prime sponsors through competition to test the efficacy of guaranteeing part-time employment during the school year and full-time employment during the summer to all eligible youth in a jurisdiction.
Title IV-A, Subpart 2, "Youth Community Conservation and Improvement Projects"	Ages 16-19 and unemployed.	Community conservation and improvement projects, not to exceed 12 months, involving employment, work experience, skill training and community service.
Title IV-A, Subpart 3, "Youth Employment and Training Programs"	Unemployed, underemployed or in school; ages 16-21; and either a member of a family whose income is at or below 85 percent of the BLS lower living standard income, or economically disadvantaged.	Work experience, institutional and on-the-job training and supportive services. Supplements, but does not replace, Title II-B services to youth.
Title IV-B, "Job Corps"	Ages 16-21; economically disadvantaged; culturally deprived; and free of serious medical and behavior problems.	Residential and nonresidential centers in which education, work experience training and counseling are provided.
Title IV-C, "Summer Youth Employment Program"	Unemployed, underemployed or in school; economically disadvantaged; and ages 14-21.	Work experience, basic education, institutional and on-the-job training and supportive services.
Title VI, "Countercyclical Public Service Employment Program"	Unemployed for at least 10 out of 12 weeks at time of intake; from a family whose income does not exceed 100 percent of the BLS lower living standard income or from a family receiving AFDC or SSI.	Entry level public service jobs and jobs in special projects.
Title VIII, "Young Adult Conservation Corps"	Unemployed; ages 16-23 inclusive.	Projects on public lands or waters administered through interagency agreements among the secretaries of Labor, Interior and Agriculture.

The Role of CETA

Current Services

It is only recently that national attention has focused on CETA as a vehicle for improving services to young parents. The Department of Labor assumes that, due to the complex and difficult problems confronting young parents, particularly single women, they are underserved in youth employment and training programs.

In a field memo dated February 13, 1980,[13] the Department of Labor's Office of Youth Programs listed young single parents as its highest priority target group in the reallocating of youth funds. The memo explains that, since 75 percent of female single parents can anticipate being heads of households at some point, and since women constitute a rapidly increasing proportion of those in poverty, the Department of Labor must make a concerted effort to redefine and expand the young parent's role in the labor market.

This new emphasis is reflected in the Administration's proposed youth legislation, the Youth Act of 1980, which was introduced in Congress on March 5, 1980 to replace the existing Youth Employment Demonstration Projects Act (YEDPA) scheduled to expire on September 30, 1980. In the proposal, the Secretary of Labor is given the authority to exempt pregnant teenagers and teenage mothers from CETA income eligibility requirements.

A recently completed survey of low-income youth in poverty areas revealed that parenthood is prevalent among CETA-eligible youth. The Manpower Demonstration Research Corporation (MDRC), a nonprofit organization which administers the Youth Incentive Entitlement Pilot Projects (YIEPP), found that 16.5 percent of those 16-19 years old who are eligible* for YIEPP have at least one child. The figures are 25.8 percent and 6.4 percent respectively for females and males. The age breakdown of eligible women with children is: 12 percent of those 16 years old; 24 percent of those 17 years old; 36 percent of those 18 years old and 50 percent of those 19 years old.[14]

It is clear that many young parents are enrolled in CETA programs; however, the level of service nationally, the types of services provided and the effect of CETA participation on young parents are not certain. Part of the problem is that many prime sponsors are not able to retrieve this information. Out of 136 prime sponsors that responded to a NACoR survey, less than half had data on the level of participation by single parents under 21 in their Title II-B and Title IV YETP programs. The available data from NACoR's survey indicates an average of 12 percent of Title II-B participants are young single parents compared to 7 percent for YETP.

*The Youth Incentive Entitlement Pilot Projects (YIEPP) is a demonstration program, operating in 17 areas across the country, which guarantees part-time work during the school year and full-time work during the summer to increase school retention. To be eligible, a youth must be 16-19 years old, have a family income at or below the poverty level and attend school while in the program.

There are a couple of other indications of the extent of participation by young parents. Enrollment figures from YIEPP, for example, show that roughly 6 percent of the 16- to 19-year-old YIEPP participants are young parents living with their children. Only 1 percent are married.* The Office of Program Evaluation in the Department of Labor estimates from the Continuous Longitudinal Manpower Survey that, during fiscal 1978, 115,200 CETA enrollees were young parents under 22 residing with their own children, comprising 4 percent of all new enrollees. As might be expected, the majority, 78 percent, were women. About 5 percent** of the youth enrollees under Title III (now Title IV) were considered young parents under the age of 22.[15]

Service Concerns

The employment needs of young pregnant women and young fathers are not so very different from those of other unemployed youth who lack educational and job skills. Their problems, however, are compounded by pregnancy and parenthood. Their needs are multifaceted and any effective intervention must integrate several essential services, including:

- Health care (prenatal and follow-up);
- Child care;
- Education (sex education, family planning, parenting education and continued secondary education);
- Transportation;
- Social services (referrals, counseling—individual, group and family);
- Employability development (work experience, vocational exploration, job finding skills and job placement).

Many CETA programs provide young parents with only one or two of the services listed above and other needs must be met on an informal, often haphazard basis. Although the CETA legislation authorizes all of these services, most prime sponsors are ill-equipped to provide the intense and long-range services necessary to tackle many of the problems faced by young parents. Often, little money is available for "support services" once the vital line items such as wages or allowances, fringe benefits and training costs are accounted for in prime sponsor's basic formula grant. The provision of support services means less money available for training and employment slots. Services to young parents will tend to be more expensive than those for other groups and placement into unsubsidized employment is more difficult.

Child Care

Perhaps the greatest barrier to employment and training for young mothers is the need for child care, by far the most expensive support service. Studies have proven conclusively that the first years after childbirth are crucial in determining the life-long economic pattern of the teen mother. Experience shows that an employment and training program for young mothers that does not make some provision for child care will not succeed. Without this significant component, young mothers cannot remain in the program.

A random survey, conducted by NACoR, of 17 prime sponsors reveals a variety of approaches and philosophies for meeting child-care needs. Philosophies about subsidized child care generally follow three paths: (1) CETA must prepare enrollees for the job market and subsidized child care is not part of the real working world; (2) CETA eligibles with child-care needs simply cannot participate unless the needs are met; and (3) child care is a necessary supportive service for some, but a participant must eventually pick up child-care costs in preparation for living on a post-CETA budget. Local arrangements range from simple, no-cost referrals to more expensive, ongoing child care fully funded by CETA. Programs must comply with applicable

*Of the 59,000 YIEPP participants enrolled during the period February 1978 to August 1979, approximately 3,600 were parents residing in the same household with their children. Six hundred participants were married.

**In response to a request by the National Association of Counties Research, Inc., the Department of Labor's Office of Program Evaluation developed a special report on young parents enrolled in CETA programs during fiscal 1978 (the most recent complete year for which data are available) based on data from the Continuous Longitudinal Manpower Survey. (CLMS samples programs under the current Title II, VI, and Title IV YETP, YCCIP and SYP.) Titles of funding in the report refer to the "old" CETA titles effective during fiscal 1978.

state and local standards including licensing requirements. Most fall into the following categories:

- Referrals to low-cost day-care providers;
- One-time stipends to CETA enrollees;
- Short-term reimbursements to either participants or day-care providers;
- Long-term reimbursements for clients enrolled in certain activities;
- Reimbursements to day-care providers for as long as clients are enrolled in a CETA program.

For example, in the Penobscot Consortium in Maine, organized day care is hard to find. The prime sponsor arranges child-care services and reimburses the provider directly for as long as the individual is enrolled in CETA. A similar system is also used in Montgomery County, Maryland, where pregnancy and child care have been major reasons cited by participants for leaving CETA programs.

There are no formal child-care arrangements for CETA clients in Monroe County, New York. With counseling by CETA program coordinators, participants find their own child-care providers. CETA subsidies can be used only as a last resort.

The prime sponsor rejected the idea of providing subsidies only after thoughtful consideration. The decision reflected the feeling that CETA clients would have a hard time adjusting to the real world, where wages are low, taxes are high and day care is costly, if they had been receiving an extra income boost through CETA-subsidized child care. Also, those clients most in need are able to obtain day care with a sliding scale fee from social services and certain community-based organizations.

The Rural Minnesota CEP, Inc., provides a one-time stipend for child care. The stipend is enough to provide about one month of care. The philosophy here is that CETA clients must be given a hand in obtaining child care but a long-term subsidy is not realistic in the world of work. Continued support is granted only when child care poses a formidable problem to a CETA client.

Several prime sponsors provide child-care subsidies on a short-term basis, usually not longer than three months. Often the subsidies will depend on the type of program in which the participant is enrolled. For example, participants who need child care to remain in classroom training in Hillsborough County, New Hampshire, are offered subsidized child care for the duration of their enrollment. Those who are enrolled in work experience or public service employment, i.e., a wage activity, can only receive this supportive service for a fixed period of time, generally three months.

Classroom training is designed to provide individuals with technical skills and information required to perform a specific job, and to upgrade basic skills in making individuals more employable. Training is normally conducted in an institutional setting. In such cases, child care becomes an incentive for individuals to participate in these programs.

Photo by W. Gail Steward, Baltimore Mayor's Office of Manpower Resources

On-the-job training, work experience and public service employment, however, mimic the work place. Participants are employed in productive work and receive wages and benefits like unsubsidized employees. By providing short-term day care, the prime sponsor helps the individual find low-cost child care and eventually budget this cost as he or she would if employed in an unsubsidized job.

Prime sponsors noted certain problems in subsidizing child care. Local legal advisers have examined the issue of liability, the legal responsibility of the prime sponsor for the safety and welfare of children while they are in the care of a CETA-subsidized day-care provider. This responsibility has led some of the prime sponsors to deal with licensed day-care providers and individuals only. They will not make arrangements with other "babysitters," such as families, friends or church groups. This poses major problems to young mothers who may have transportation difficulties in getting their children to centers and who are faced with limited day-care availability, especially in rural areas.

Another issue is the availability of "free" welfare-funded day care for those on public assistance such as AFDC. Often in rural areas, these facilities do not exist. In large jurisdictions, several agencies reach their limits in serving clients. The prime sponsor ends up filling these service needs.

The Portage County CETA Program in Ohio and the local welfare day-care provider spent over $150,000 on child care last year. There is no county supported day-care service. Each year, Portage County CETA contracts with a licensed day-care center that submits the lowest bid for quality service. The cost per child is $30 a week, $40 a week for an infant. A Portage County CETA staff member estimates that well over half of the single mothers could not participate in CETA programs without child care. Every 90 days, CETA staff determines if there has been a change in an individual's need for child care so that others can be served.

Staff also pointed to the problem of unrealistic subsidy. Often, the young mother is on welfare when she comes to CETA. She is enrolled in a program, paid wages or allowances, provided with day care and prepared to live independent of CETA or public assistance. Once out of CETA, however, the individual is faced with an income that can't pay all the bills because of day-care costs. This individual often returns to welfare.

The Portage County prime sponsor is considering a graduated payment plan so that the CETA participant will pay for some of the costs for child care in an attempt to prepare the individual for budgeting in the "real world." A fiscal problem, however, is created. The prime sponsor is not a "collecting agency," the system is designed to disburse money. Many day-care centers face the same problem. The centers are accustomed to receiving bulk payments from the prime sponsors and other agencies and have difficulty in administering programs when relying on individual payments.

Several jurisdictions have overcome the lack of day-care providers by offering CETA training in this area. Licensed home-care or child-care aides are trained in the Northern Virginia Manpower Consortium and the Louisville/Jefferson County Consortium in Kentucky. In the Lowell Consortium, Massachusetts, CETA public service employment slots are used to train welfare mothers as child-care providers and as a source of day care for program participants.

CETA Programs for Young Parents

For the most part, comprehensive service programs for young parents have focused on four components—education, health care, social services and child care. Emphasis on the employment needs of pregnant youth and young parents is a relatively new phenomenon. In several communities, however, CETA has been used effectively to assist young parents. Following are brief descriptions* of three programs using somewhat different approaches to serve young parents with CETA. They are presented as examples, from which ideas and a few lessons can be gleaned, not as "models" or "service packages" to be accepted or rejected in total.

Photo by W. Gail Steward, Baltimore Mayor's Office of Manpower Resources

Baltimore Consortium, Maryland
Parent-Infant Center and
Family Day-Care Program

About four years ago, CETA program planners in Baltimore became concerned about poor attendance in their large and otherwise very successful alternative education program for youth, called Harbor City Learning. After an investigation, it was discovered that many of the students were parents and were absent frequently because they did not have adequate child-care arrangements. In response, the prime sponsor, in conjunction with the Baltimore City Schools, opened a *Parent-Infant Center* which provides free child care and parenting education classes for approximately 35 young parents enrolled in the Harbor City Learning program.

The school system provides four early childhood education specialists and a program director. The prime sponsor provides the facility, materials and supplies and six child-care aides funded by CETA, Title VI, public service employment.

Young parents who use the center for child care are required to attend a parenting class that deals with topics ranging from health and nutrition to early childhood development; many receive academic credit for participation. The curriculum is designed to respond to the young parents' needs and concerns as they arise. Even the infants follow a curriculum individually designed based on their age and stage of development.

Since the center is not equipped to respond to certain needs of its students, the teachers and the center's coordinator refer young parents to appropriate community agencies and spearhead efforts to ensure that services are coordinated.

The only major problem has been a long waiting list. Consequently, another center with capacity for an additional 35 participants opened in April 1980.

Another approach to meeting child-care needs is the *Family Day-Care Program.* Baltimore is one of 17 areas in the country selected to operate a Youth Incentive Entitlement Pilot Project (YIEPP), a demonstration program which guarantees part-time work during the school year and full-time work during the

*More detailed descriptions of each program—including funding levels, number of participants, problems and implementation suggestions—appear in Appendix C.

summer to increase school retention. Many of the 8,000 16- to 19-year-old YIEPP enrollees are parents and their successful participation is dependent on the availability of child care. The Family Day-Care Program trains unemployed adults to be licensed home day-care providers and provides free day care for children of YIEPP participants.

Day-care providers are recruited in areas of the city where the YIEPP program operates. They attend a month-long training program for three hours a day, four days a week. The training covers such issues as early childhood development, activities for children of various ages, safety and first aid, identification of child abuse and neglect, nutrition and menu planning and starting and operating a small business. Once licensed by the state, the day-care providers care for up to four children in their homes and are paid $108 per month for each child they supervise.

Program contact: Stephen Kaiser, Public Information Officer, Mayor's Office of Manpower Resources, 701 St. Paul Street, Suite 105, Baltimore, Maryland 21202, 301/848-0660.

Albuquerque/Bernalillo County Consortium, New Mexico
New Futures School

Starting back in 1970 as a small project of the Albuquerque YWCA, New Futures School has grown to become one of the best-known comprehensive service programs for pregnant teenagers and teenage parents. It is also one of the few programs in the country which uses CETA funds to operate an employment component. The primary administering agency is the Albuquerque public schools. CETA money is coordinated with more than eight different sources of federal, state and local funds to provide a full range of services.

Until recently, expectant mothers were only able to remain in the program for the remainder of the school year in which their babies were born. CETA, however, has made it possible for many of the highest-risk adolescent mothers and fathers to receive ongoing intensive support through a new component called the Young Parents' Center. Approximately one-third of the Albuquerque Consortium's 22 percent in-school funds go to the Young Parents' Center. Roughly 70 to 80 percent of the participants are school dropouts before entering the center.

CETA-funded employment activities augment alternative education, health services, counseling, child care and other related services. A counselor and two

work supervisors help the young parents to cope with current responsibilities and prepare for employment through individual and group counseling and job preparation activities.

Students may earn academic credit for taking part in groups which meet regularly to discuss topics such as coping with the pressures of parenthood, adjusting to new family relationships and roles and setting personal goals. The work supervisor also teaches a class called "Earning and Spending Money," which focuses on consumer education, career exploration, preparation for employment and decision making.

Many students are referred to appropriate CETA training and work experience opportunities and others are assisted in finding employment in the private sector. The center can serve approximately 140 young mothers and 30 young fathers.

The Albuquerque Consortium is one of 17 prime sponsors operating Youth Incentive Entitlement Pilot Projects (YIEPP). Through a special arrangement using funds from the Department of Health and Human Services (formerly HEW) to provide on-site day care, job counseling and supervision and supportive services, approximately 48 New Futures students participate in the Albuquerque YIEPP program. Eligible students interested in working are identified early in New Future's enrollment process and may work up to 20 hours per week.

Program contact: Caroline Gaston, Director, New Futures School, 2120 Louisiana Boulevard, N.E., Albuquerque, New Mexico 87110, 505/883-5680.

Mid-Willamette Valley Consortium, Oregon
Salem YWCA Teen Mother Program

The Mid-Willamette Valley Consortium funds an employment counselor to work specifically with pregnant adolescents and young parents enrolled in the Teen Mother Program. The program seeks to minimize the health, educational, emotional and economic risks of young parents and foster the development of the skills and positive attitudes necessary for their future success.

To be eligible, a person must be 18 or under, pregnant or a care-giving parent (this includes young fathers), be eligible to attend Salem schools and interested in participating. Prospective students meet with a counselor at least twice during their first two weeks to develop a plan which includes a contract to meet minimum requirements in each of the program's five components—social services, education, health, parenting and employment.

Each participant must meet with the employment counselor during the first nine weeks of participation for an initial interview and assessment. The employment counselor assists the students in completing a self-inventory that appraises their needs, accomplishments and short- and long-term goals. A CETA application is completed so the prime sponsor can determine the eligibility of those interested in a CETA training or work experience position. At the minimum, each participant will acquire a Social Security number, obtain a work permit (if under 18) and compile a resume before leaving the program.

The employment counselor works closely with the program's career education teacher, social service counselors and all other staff to deal with the young parent's many barriers to employment. The employment counselor also conducts sessions on values clarification, decision making and consumer issues and provides individual and group counseling, job development and job placement services.

For many participants, placement in a job while they attend the program is not desirable since their "hands are full" with maintaining a home, finishing school and caring for their child. Nevertheless, students formulate employability development plans and participate in a

variety of activities designed to increase future opportunities. They use a computerized career information system, put together resumes, attend mock interviews, practice filling out job applications and learn how to take advantage of community resources through field trips and guest lectures.

The employment counselor also works with young fathers who are not enrolled in the program but whose partners and children are. Often the counseling takes place after school hours in the individual's home. Primarily, the counselor offers these fathers personal and career counseling, job placement and job development services.

Program contact: Tanarae Shaw, Employment Counselor, YWCA/Teen Mother Program, 768 State Street, Salem, Oregon 97301, 503/581-9922.

Department of Labor Initiatives

The Department of Labor's (DOL) Office of Youth Programs (OYP) has three major discretionary efforts under way to develop information for the CETA system on ways to serve pregnant adolescents and young parents. Below are brief descriptions of the initiatives.

The Women's Bureau. OYP has funded the DOL Women's Bureau in fiscal 1980 to administer five to eight 18-month demonstration programs that address the employment needs of adolescent mothers. The goal is to develop several possible models of intervention which can eventually be replicated by prime sponsors. Contracts to operate the program models will be awarded to community-based organizations and public school systems.

Information contact: Dorothy Wigglesworth, Women's Bureau, 200 Constitution Avenue, N.W., Washington, D.C. 20210, 202/523-6631.

Manpower Development Research Corporation (MDRC). MDRC, a nonprofit corporation which designs, manages and evaluates social programs, has been awarded a contract by OYP in fiscal 1980 to fund 18-month demonstration programs at six sites for pregnant teenagers and teenage mothers who are on welfare or members of welfare families. Community-based organizations will operate the programs and special emphasis will be placed on developing and examining new links between the Work Incentive Program (WIN) and other existing service delivery mechanisms. The programs will identify local community women to work individually with teenagers and their families and coordinate the delivery of needed services.

Information contact: Vivian Manning, MDRC, Three Park Avenue, New York, New York 10016, 212/532-3200.

Youthwork, Inc. In fiscal 1980, Youthwork, Inc., a nonprofit intermediary set up by the Department of Labor, conducted a national competition to identify and fund exemplary programs for high-risk youth. Three out of the 13 proposals funded are programs directed toward pregnant adolescents and young parents. These are: New Futures Schools, Albuquerque, New Mexico; the Boston YWCA, Boston, Massachusetts; and Sisterhood of Black Single Mothers, Brooklyn, New York. The Youthwork grants will allow each of these programs to add an employment component to the existing complement of services. Innovative ways to teach employment skills and provide employment incentives to encourage school completion and defer future pregnancies will be implemented and evaluated.

Information contact: Karabelle Pizzigati, Youthwork, Inc., 805 15th Street, N.W., Washington, D.C. 20005, 202/347-2900.

Strategies for Improving Services

To determine how best to reach and serve pregnant adolescents and young parents at the local level, CETA program operators will first need to investigate several areas: local needs, priorities and programs.

Assessing Local Needs

Pregnant adolescents and young parents are at high risk nationally and their numbers are growing. To determine whether this group should be a local priority, prime sponsors can test the national facts against local reality in a number of ways:

- Find out how many of these youngsters come to your own program for help. Participant characteristics data can give an indication, but recruiters, intake workers and counselors may have a better sense of when and why young parents turn to CETA for help. Many prime sponsors, when asked, have been surprised at how many of their clients are young parents.
- Check the statistics—census figures and other population profiles.
- Consult other agencies. To what extent do the schools attribute dropouts to pregnancy and parenthood? Since health care is the pregnant teenager's most immediate concern, check with the public health service, clinics and other likely health-care providers. AFDC is often a young mother's last resort; what do welfare workers say about the number and needs of young parents? Local experts are probably already on the CETA advisory council, just waiting to be asked.

Weighing Local Priorities

"Administrative" barriers to serving young parents in CETA are high. Since program goals are long-term and often don't lead directly to job placement, this kind of effort is not good for a prime sponsor's placement rate. Since young parents require very high levels of supportive services, a CETA-funded comprehensive program calls for very high costs per person. Pulling together all the necessary services requires much time-consuming coordination with other providers.

You may find, on the other hand, that this group is undeniably "most in need" and that the local commitment to serving it outweighs the artifical imperative of the numbers.

Other factors in prime sponsor priority setting may include the presence or absence of other agencies addressing these youngsters' needs. If there is an early child-bearing problem locally and it's being ignored, the prime sponsor has a real responsibility to raise the issue. Where others are well aware of the problem, the prime sponsor may consider only the need for an

employment component, not necessarily a major financial and staff commitment.

Examining Local Programs

Take a look at current programs in light of the needs identified. Small changes can sometimes yield big results. Prime sponsors can examine aspects of their service delivery system in several ways:

- Find out if you are screening out young parents. Child-care problems and worker attitudes toward young single parents are the most common barriers to CETA participation.
- Counselors, recruiters or intake workers may know if many interested youngsters cannot participate because of health or child-care concerns. Do the schools find that many young mothers drop out? What happens to them? How many of your CETA enrollees are young parents?
- Has anyone researched the availability of child care? Do all counselors have a list? Are there phones available for young parents' use? Transportation for "shopping trips" to look over potential private providers?
- Counselors, recruiters or intake workers, perhaps, should examine and reassess their expectations of young parents. Daphne Busby, director of the Sisterhood of Black Single Mothers, says that many young mothers' aggressively independent behavior may be a smokescreen for very desperate needs. See our interview with her on page 49.
- Is pregnancy a common cause for CETA program dropouts? Some girls don't understand that they don't have to drop out. Most are fairly unrealistic about what to expect from motherhood.
- Are there referrals in place for pregnant teenagers, whether applicants or enrollees? Often, certain counselors have informally blazed a trail of interlocking, coordinated services. A pattern of referrals can be built on such networks. In some areas, one counselor specializes in shepherding the very tough cases through the maze of social agencies, but caseloads have to be adjusted to accommodate this.
- Are workers sure of what they can and cannot do or say in terms of family planning? CETA prohibits the requirement that enrollees accept family planning services (Section 121[a][3]). Uncertainty about this provision can unnecessarily limit a counselor's options.
- Can CETA participants themselves provide child care for other enrollees?
- Could parent-education and child-care workers be trained under CETA, then used to provide these services for later enrollees?
- What happens if a young mother decides to stay home with her baby, rather than to continue school, work or training? Would intensive job search training have a lasting effect, if she can be persuaded to stay two weeks? Are there any continuing education programs especially for young mothers that she could be persuaded to join? Perhaps such cases could be tagged for priority follow-up recruitment.
- Remember young fathers. While they appeal for help much less frequently than mothers, every effort they make to share responsibility for their children should be rewarded, not discouraged. If they drop out to support their children, counseling designed to encourage a return to school must be sensitive to the young man's pride and sense of responsibility.
- Avoid sex-specific program titles.
- Use typewritten information sheets for young fathers if specially designed brochures are clearly geared toward mothers.
- Talk to health and social workers already serving young parents about the youngsters' ultimate job prospects. Would an employment component be a good addition to their programs?
- Find out what needs are simply going unmet and encourage appropriate groups to apply for some of the

Photo courtesy New Futures School, Albuquerque, N.M.

federal funds listed in Appendix G. If no federal funds match the needs identified, talk to the United Way, community and volunteer groups, churches and synagogues that might consider developing the needed service.

- Use your subagents' expertise, clients' own views and counselors' experience to find solutions that can transform a program.

Needed: Comprehensive Services

Those overused Washington catch words—coordination and linkages—apply doubly to serving young parents. The major barrier to serving young parents with CETA is fragmented services. Pregnant adolescents and young parents have many needs and problems which reduce their chances for employment. To succeed, they must find a way to deal with much more than employment needs.

The CETA system can provide many needed services but is not structured to respond to some of the more intense support service needs of young parents. Prime sponsors can, however, function as coordinators to direct participants to appropriate community service agencies.

In very small areas, where only a handful of youngsters need such intensive help, CETA might even be the sole source of funding. Normally, however, CETA will either contribute an employment component to a health or social services effort, or it will be the focal point for pulling a number of services together. This might involve meeting with local agencies and organizations—health, social service and welfare agencies, local churches, voluntary organizations, schools, community action agencies, day-care centers, hospitals and clinics—to develop a community-wide plan.

The plan should identify the services each agency will provide, outline an organized system for referrals and determine how several individual programs and services can respond to young parents' needs in a coordinated manner. Perhaps one agency or organization might be designated as an "anchor agency," taking responsibility for the involvement and coordination of other agencies and services.

Staff Training

Young parents have unique problems that require much sensitivity, individual attention and support on the part of service providers. If counselors communicate a negative or punitive attitude, problems are multiplied. CETA program planners should consider developing in-

service training programs that focus on the special needs of the young mother or father.

Many young parents require services from a variety of programs and agencies. To be an effective advocate, CETA staff should be aware of other programs outside of CETA and be knowledgeable enough about the various requirements and eligibility criteria to guide their clients around many of the bureaucratic roadblocks. This involves more than informing clients of the names and addresses of available community services, although that is a first step. It means following up on referrals to assure that the appropriate services are provided.

A Word About "Model" Programs

Many of the best comprehensive programs have an elaborate packaging of services, using several sources of funding, and often operate under several different fiscal years. Many of the Department of Labor's discretionary efforts for young parents stress new relationships with community groups and other federal programs and combinations of several funding sources. If these models are refined so they can be easily integrated into prime sponsors' ongoing programs, perhaps local service delivery will move in this direction. Given the crisis management atmosphere of many CETA programs, however, this approach is often unrealistic.

The pertinent question for CETA planners to address is, "How can services to pregnant adolescents and young parents be improved in the context of an ongoing comprehensive CETA service delivery system?" There is no single program model. Each prime sponsor will have to determine its own priorities and how to organize services within its own community.

Appendices

A. Footnotes
B. Selected Statistics
C. Case Studies
   Baltimore Consortium: Parent-Infant Program/Family Day-Care Program
   Albuquerque/Bernalillo County Consortium: New Futures School
   Mid-Willamette Valley Consortium: YWCA Teen Mother Program
D. Many Questions and a Few Answers for Counselors
E. Interviews with Selected Experts
F. Recommended References
G. Federal Programs Related to Adolescent Pregnancy and Parenthood

Appendix A

28 Footnotes

[1]Stanford Research Institute International, *An Analysis of Government Expenditures Consequent on Teenage Childbirth*, Prepared for the Population Resource Center (Menlo Park: Author, 1979).

[2]Joseph A Califano, "Adolescent Health, Services, and Pregnancy Prevention and Care Act of 1978" (Testimony delivered before the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C., June 14, 1978), p. 19.

[3]Kristin A. Moore et al., *Teenage Motherhood: Social and Economic Consequences* (Washington, D.C.: The Urban Institute, 1978), p. 1.

[4]The Alan Guttmacher Institute, *11 Million Teenagers: What Can Be Done About the Epidemic of Adolescent Pregnancies in the United States* (New York: Planned Parenthood Federation of America, Inc., 1976), p. 64.

[5]Lloyd Bacon, "Early Motherhood, Accelerated Role Transition and Social Pathology," in *Social Forces* (Chapel Hill: University of North Carolina Press, Volume 52, Number 3, 1974), p. 339.

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[14]Suzanne Barclay et al., *Schooling and Work Among Youths from Low-Income Households: A Baseline Report from the Entitlement Demonstration* (New York: Manpower Demonstration Research Corporation, 1979), pp. 36-37.

[15]United States Department of Labor, "Single Parents under Age 22 Enrolled in Decentralized CETA Programs," Prepared on special request of the National Association of Counties Research, Inc., mimeographed (Washington, D.C.: U.S. DOL, 1980), p.2.

Photo courtesy New Futures School, Albuquerque, N.M.

Appendix B

Selected Statistics

Population

The population 15 to 19 years old has swelled over the past 25 years. High birth rates during the baby boom of 1946-1957 created a bulge in the age structure during the 1960s and 1970s. For example, the population of women 15 to 19 years old has increased from 6.5 million in 1960 to 10.4 million in 1977. Over the next 15 years, the number of adolescents will decrease slightly. But it will increase thereafter when the babies born in the mid-1970s and early 1980s reach their teens.

Source: "Adolescent Health, Services, and Pregnancy Prevention and Care Act of 1978 " (Testimony delivered before the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C. June 14 and July 12, 1978).

Source: Elizabeth M. Whelan and George K. Higgins, *Teenage Childbearing—Extent and Consequences* (Washington, D.C.: Consortium on Early Childbearing and Childrearing, January 1973).

Health Factors

Half of pregnant teenagers age 15 to 17 receive no prenatal care until the second trimester of their pregnancy. Six percent of teenagers under 15 receive no prenatal care at all. Because of this and other factors, a baby born to a teenage mother is more than twice as likely to die during the first year of life than a baby born to an older woman. Developmental disabilities are twice as likely to occur in the children of teen mothers than in the offspring of older mothers. The likelihood of low birth weight babies is 30 to 50 percent greater for teenagers, and low birth weight is associated with a number of conditions that can cause lifelong health and disability problems.

Source: "Adolescent Health, Services, and Pregnancy Prevention and Care Act of 1978 " (Testimony delivered before the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C., June 14 and July 12, 1978).

Repeat Pregnancies

Of all teenagers who give birth, the frequency of repeat pregnancies is 18 percent by six months postpartum, 44 percent at one year, 70 percent at two years and 95 percent at five years when contraceptive programs are unavailable. When family planning services are available, evidence indicates that at least 50 percent still become pregnant within 36 months of the delivery of their first child. The most dramatic effect of repeat teenage pregnancy is the increased health risk not only to the mother, but also to the second and subsequent infants.

Source: Philip M. Sarrel, "The University and the Teenage Unwed Mother," in *American Journal of Public Health* (Washington, D.C.: American Public Health Association, Volume 57, Number 8, 1967).

Source: Frank F. Furstenberg, *Unplanned Parenthood: The Social Consequences of Teenage Childbearing* (New York: The Free Press, 1976).

Birth Rates

Over the last two decades, there has been a substantial decline in overall birth rates in the U.S. Fertility rates, however, have not fallen as rapidly among teenagers as they have for older women. While the total number of births to teenagers today is not much different than in 1961, the age distribution of the mothers is younger. The birth rate among 10 to 14 year olds alone increased by about 25 percent in the last decade. Each year, more than one million or one tenth of all 15- to 19-year-old women in this country become pregnant. In addition, 30,000 girls younger than 15 get pregnant annually. Approximately 600,000 teenagers will give birth in 1980. Over half of all babies born to teenagers are out of wedlock.

Source: "Adolescent Health, Services, and Pregnancy Prevention and Care Act of 1978 " (Testimony delivered before the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C., June 14 and July 12, 1978).

Source: Kristin Moore et al., *Teenage Motherhood: Social and Economic Consequences* (Washington, D.C.: The Urban Institute, 1979).

Divorce

The younger a girl is when she first marries, the higher the probability of separation or divorce. A teenager who marries at age 14 to 17, for example, is two to three times more likely to experience divorce or separation than one who marries in her early twenties. Approximately 50 percent of all teenage marriages result in divorce in five years.

Source: "Adolescent Health, Services, and Pregnancy Prevention and Care Act of 1978 " (Testimony delivered the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C. June 14 and July 12, 1978).

Source: Frank F. Furstenberg , *Unplanned Parenthood: The Social Consequences of Teenage Childbearing* (New York: The Free Press, 1976).

Abortion

Statistics confirm that many teenage pregnancies are now resolved through abortion. About one-third of all U.S. abortions each year are obtained by teenagers, about one half of these by 18 and 19 year olds, 45 percent by 15 to 17 year olds and 5 percent by youngsters 14 and younger. The total number has risen from about 191,400 in 1972, the year before the Supreme Court abortion decisions, to about 325,000 in 1975 and 400,000 in 1979.

Source: The Alan Guttmacher Institute, *11 Million Teenagers: What Can Be Done About the Epidemic of Adolescent Pregnancies in the United States* (New York: Planned Parenthood Federation of America, Inc., 1976).

Welfare

The annual earnings of a woman who has her first child at age 15 or below are roughly 30 percent less than the earnings of a woman who has her first child at 19 or 20. More than 94 percent of teen mothers who choose to keep their children are dependent on public welfare for economic support. In 1975, the federal government disbursed $4.65 billion through the Aid to Families with Dependent Children program to households containing women who bore their first child while teenagers. Of all children born out of wedlock to teenagers, almost 60 percent end up on welfare.

Source: "Adolescent Health, Services and Pregnancy Prevention and Care Act of 1978 " (Testimony delivered before the United States Senate Committee on Human Resources, Ninety-fifth Congress, Washington, D.C., June 14 and July 12, 1978).

Source: Steven P. Schinke et al., "Improving Teenage Mother's Ability to Compete for Jobs," in *Social Work Research and Abstracts* (Washington, D.C.: National Association of Social Workers, Inc., Volume 14, Number 3, 1978).

School Dropouts

Pregnancy is the largest single cause of school dropout. About 80 percent of women who first become mothers at 17 or younger never complete high school, twice as high a proportion as those who do not give birth until they are 20 or older. Ninety percent of mothers 15 or younger drop out of school and 40 percent do not make make it through the eighth grade.

Source: Lloyd Bacon, "Early Motherhood, Accelerated Role Transition and Social Pathology," in *Social Forces* (Chapel Hill: University of North Carolina Press, Volume 52, Number 3, 1974).

Photo by W. Gail Steward, Baltimore Mayor's Office of Manpower Resources

Young Parents Eligible for CETA

Table 4 presents the distribution of low-income parents between 16 and 19 years old who are eligible for the Youth Incentive Entitlement Pilot Projects (YIEPP), a program operating in 17 areas of the country which guarantees part-time jobs during the school year and full-time work during the summer to increase school retention. Of eligible YIEPP participants, 16.5 percent have at least one child. The figure rises dramatically with age. Whereas 12.2 percent of 16-year-old eligible females have children, over 50 percent of the 19-year-old females are mothers.

Table 4
Out of the YIEPP-Eligible Population, Percentage of Youths with Children by Age, Race, Sex and Household Head Status

	Females	Males	Total
White	24.8	5.9	15.6
Black	26.5	6.5	17.0
Hispanic	23.0	7.4	15.1
Other	27.0	2.2	13.4
16 years old	12.2	1.9	7.3
17 years old	23.7	4.6	14.4
18 years old	36.2	9.8	23.5
19 years old	51.8	17.2	34.8
Head of Household	66.8	18.8	52.9
Not Head of of Household	20.0	5.7	12.8
TOTAL (16 to 19)	25.8	6.4	16.5

Table 5 presents the distribution of single youths with children. The percentages are slightly smaller but reveal a similar pattern. However, there are greater differences in the childbearing rates among single youths by racial group. Single black youths have a much higher incidence of births than do single white youths.

Table 5
Out of the YIEPP-Eligible Population Percentage of Single Youths with Children by Age, Race, Sex and Household Head Status

	Females	Males	Total
White	16.5	3.1	9.6
Black	25.6	6.5	16.4
Hispanic	17.3	5.4	11.0
Other	22.9	2.2	11.2
16 years old	11.4	2.0	6.8
17 years old	22.0	4.4	13.3
18 years old	33.3	8.8	21.1
19 years old	47.7	14.7	30.7
Head of Household	63.8	9.2	46.2
Not Head of Household	19.2	5.6	12.4
TOTAL	23.3	5.8	14.7

Source: Suzanne Barclay et al., *Schooling and Work Among Youths from Low-Income Households: A Baseline Report from the Entitlement Demonstration* (New York: Manpower Demonstration Research Corporation, 1979).

Participation of Young Parents in CETA Programs

Table 6 presents data gathered from the Continuous Longitudinal Manpower Survey (CLMS) on young parents enrolled in CETA in fiscal 1978. For purposes of the analysis, the term "single parents" was defined as enrollees who at CETA entry were unmarried but did have their children residing with them in the same household. The estimates are that, in fiscal 1978, the programs surveyed by CLMS (adult-oriented programs under old Titles I, II, VI and youth programs funded under the "old" Titles I and III) newly enrolled 2,380,200 persons. Approximately 115,200 enrollees were considered young parents under age 22, comprising 4 percent of all new enrollees. Approximately 80,600 or 3 percent of new enrollees were single parents under age 22.

Source: United States Department of Labor, "Single Parents Under Age 22 Enrolled in Decentralized CETA Programs," prepared on special request of the National Association of Counties Research, Inc., mimeographed (Washington, D.C.: U.S. DOL, 1980).

Table 6
Characteristics of CETA Enrollees Who Were Parents, Fiscal 1978[1]

Selected Characteristics	Enrollees Age 22 and Over Who Were Parents	Enrollees Under Age 22 Who Were Parents	Single Parents[2] Under Age 22
Estimated number of new enrollees	381,300	115,200	80,600
Percent[3]	100	100	100
Age at entry:			
Under 18	—	23	28
18-21	—	77	72
22 and over	100	—	—
Sex:			
Male	39	22	(12)
Female	61	78	88
Minority status:			
White, excluding Hispanic	55	34	25
Minority[4]	45	66	75
Marital status at entry:			
Married	56	30	—
Single[5]	44	70	100
Head of family status:			
Head of family	76	43	40
Not head of family	24	57	60
In-school status at entry:			
In-school	7	31	42
Not in-school	93	69	58

[1] Based upon enrollees in CETA programs sampled by CLMS. "Parents" refer to enrollees who had their children residing with them in the same houshold.

[2] "Single parents" refers to enrollees who were unmarried but had their children residing with them in the same household.

[3] Based upon enrollees for whom all information is available.

[4] "Minority" includes black, Hispanic and other nonwhite groups.

[5] "Single" includes widowed, divorced, separated and never married.

Source: Continuous Longitudinal Manpower Survey, Special Cross-Tabulations.

Photo Courtesy New Futures School,
Albuquerque, N.M.

Appendix C
Case Studies

Baltimore Consortium, Maryland

Family Day-Care Program
Parent-Infant Center

These two programs are operated by the Mayor's Office of Manpower Resources, a prime sponsor, and the Baltimore City Schools, an education agency. Costs are $2,200 per slot per year at the Parent-Infant Center and $108 per month per child in Family Day-Care. Funding for Family Day-Care comes from CETA Title IV YIEPP ($600,000); for the Parent-Infant Center from CETA Title IV YETP ($73,375). The Parent-Infant Center serves approximately 35; Family Day-Care is projected to serve 600-650.

Unique Features of Programs:

The prime sponsor uses two different approaches to meet the child-care needs of young parents and thereby improve program attendance. The Parent-Infant Center offers child care, early childhood education and parenting education for young parents enrolled in Baltimore's alternative education program. The Family Day-Care Program trains unemployed adults to be licensed home day-care providers. Young parents enrolled in Baltimore's Entitlement Program (YIEPP) are eligible for free day-care services from the home providers.

Duration of Grants:

Family Day Care: October 1, 1979-September 30, 1980
Parent-Infant Center: October 1, 1979-September 30, 1980

Major Program Goals and Objectives:

Both child-care arrangements aim to improve young parents' attendance in CETA youth programs. The availability of child care makes it possible for young parents to go to school as well as hold a job. The Parent-Infant Center also seeks to teach youth with children to become better parents and provide opportunities for their children's successful development. The Family Day-Care Program is designed to have a lasting impact on the community by increasing the availability of quality day care, even when this program is completed.

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Program Description: Family Day-Care Program:

Baltimore is one of 17 areas in the country selected to operate a Youth Incentive Entitlement Pilot Project (YIEPP), a demonstration program which guarantees part-time work during the school year and full-time work during the summer to increase school retention. Many of the 8,000 16-19-year-old YIEPP enrollees are parents, and their successful participation is dependent on the availability of child care. The Family Day-Care Program trains unemployed adults to be licensed home day-care providers and provides free day care for children of YIEPP participants.

Day-care providers are recruited in areas of the city where the YIEPP program operates. They attend a month-long training program that meets three hours a day, four days a week. The training covers issues such as: early childhood development, activities for children of various ages, safety and first aid, identification of child abuse and neglect, nutrition and menu planning and starting and operating a small business. Once licensed

by the state, the day-care providers care for up to four children in their homes and are paid $108 per month for each child they supervise.

Program Description: Parent-Infant Center:

Jointly operated by the prime sponsor and the Baltimore City Schools, the Parent-Infant Center provides free child care and parenting education classes for young parents enrolled in Baltimore's alternative education program, called Harbor City Learning. Young parents who use the center for child care are required to attend a parenting class (many receive academic credit for participation) that deals with topics ranging from coping with parenthood to early childhood development. The curriculum is designed to respond to the young parent's needs and concerns as they arise. Even the infants follow a curriculum individually designed according to their age and developmental stage.

Since the center is not equipped to respond to all the needs of its students, the teachers and the center's coordinator refer young parents to appropriate community agencies and spearhead efforts to ensure that services are coordinated.

Students are encouraged to spend as much time with their children at the center as their schedules permit. In the Harbor City Learning Program, participants work for two weeks and attend school for two weeks. A few young parents use the Parent-Infant Center as a worksite.

Administrative and Staff Requirements:

The Parent-Infant Center has four teachers and a program director provided by the school system. All are specialists in early childhood education. The prime sponsor provides the facility, materials and supplies and six child-care aides funded by CETA, Title VI, Public Service Employment.

The Family Day-Care staff includes a director, intake worker, trainer, licenser, secretary and a part-time home inspector.

Recruitment/Client Profile:

Roughly 85 to 90 percent of the Parent-Infant Center participants are minorities. Close to 98 percent are minorities in the Family Day-Care Program. Of the approximately 35 students who use the Parent-Infant Center, four are young fathers. None of the YIEPP participants who use Family Day-Care are fathers.

All students entering the Harbor City Learning Program go through an assessment process. If day-care needs are identified, they are referred to the Parent-Infant Center. Recruitment is not a problem; with only 35 slots available, there is a long waiting list.

Youth enrolling in the YIEPP program also go through an assessment process. If day care is a problem they are referred to the Family Day-Care Program. CETA counselors, who are outstationed in every major high school participating in the YIEPP program, also refer young parents to Family Day-Care. In addition, flyers were distributed to schools, alternative education centers and CETA intake offices and placed with each of the YIEPP participants' paychecks.

Outcomes to Date:

In the four years since the Parent-Infant Center was opened, attendance in the Harbor City Learning Program has improved by more than 20 percent. Part of the improvement is due to the day care made available by the center. Furthermore, the retention rate for Harbor City students with children who use the center is much higher than for those with children who do not.

It is too early to discern the effects participation in Family Day-Care will have on students' attendance and length of participation in the YIEPP program.

Problems/Progress:

Planners initially estimated that over 700 young parents enrolled in YIEPP would take advantage of free

child care provided by the Family Day-Care Program. Start-up, however, was surprisingly slow with only 67 participants after four months. It is unclear why there was such a slow start, and planners have revised the estimates to 600-650 participants. The training of day-care providers has gone quite well, with 51 care-givers completing the month-long training program by April 1, 1980.

The Parent-Infant Center has been very successful. The only major problem has been a lack of resources needed to serve more young parents. Consequently, another center with the capacity for an additional 35 participants opened in April 1980. A long waiting list still remains. The only other problems have been transportation and scheduling. Harbor City Learning students are very busy. It is often difficult for the young parents, who primarily depend on city buses, to coordinate work and school with dropping off and picking up their children and attending parenting classes. Often this requires $1.50 to $2 in bus fare each day and nearly two hours of travel time.

Implementation Hints:

In Maryland, it is possible to become a licensed day-care provider without participating in a training program. However, Baltimore's experience indicates that participation in a training program leads to better quality child care and improves the chances that the providers will remain in the family day-care business. It is also very important to pay the care-givers enough to survive without another source of income, so that running a small business is more attractive than going on welfare. With all the business expenses, food and supply costs, the Baltimore family day-care providers, who take in a maximum of $436 per month, earn only slightly more than they would receive on welfare.

Staff at Baltimore Parent-Infant Center have learned that providing child care is not enough. Young parents have many support service needs. Parenting education is crucial. Teachers and counselors who work with young parents should be knowledgeable about community resources, and one person or one agency should take the lead in making sure those needs are met.

Albuquerque-Bernalillo County Consortium, New Mexico

New Futures School

The New Futures School, an education and private nonprofit agency, operates an employment component. Funding of $51,055 comes from CETA Title IV YETP, approximately $300,000 for three years from the Office of Human Development, Department of Health and Human Services, and $320,450 from CETA Title IV, Discretionary, Youthwork Inc. CETA Title IV YIEPP funds employ eligible New Futures students but are not given directly to the school.

There were 48 YIEPP participants from September 1979 to March 1980; there is a projected enrollment of 170 for the Young Parents' Center for fiscal 1980 (one-third funded by YETP 22 percent in-school funds).

Unique Features of Program:

New Futures School is one of very few comprehensive programs in the country which use CETA funds to operate an employment component for pregnant teenagers and teenage parents. CETA money is coordinated with over eight different sources of federal, state and local funds to provide a full range of services so that the special health, education, social service, child-care and employment needs of the participants are met by one agency. Setting goals to show young women that pregnancy need not limit vocational aspirations, exploring nontraditional roles, job training and job finding skills are emphasized in several ways.

Duration of Grants:

YETP: October 1, 1979-September 30, 1980
HHS: (Support for YIEPP Component) October 1, 1978-September 30, 1981
Youthwork Inc. (Discretionary): April 1, 1980-September 30, 1981

Major Program Goals and Objectives:

Overall goals are to: help young women prepare for and adjust to motherhood; instill a healthy self-concept; help solve personal problems; encourage young women to complete their high school education; ensure proper health care for mother and baby and aid in the development of a satisfactory relationship with family and society.

Specific employment-related objectives include assisting young parents to: successfully combine parenting and employment; develop positive attitudes toward employment; acquire marketable skills and gain on-the-job experience leading toward regular employment. The program also seeks to develop positive attitudes toward the young mother's employment by her family and boyfriend or husband.

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Program Description:

New Futures School is a comprehensive program for teenage parents. It is divided into three major components: the Perinatal Program, the Young Parents' Center and the Entitlement Component, called WORP (Work Opportunities Research Program) (See chart.) The latter two components are CETA- related.

Perinatal Program: A full range of services in the

areas of health, education, social services, child care and family counseling is provided for expectant mothers, who may stay in the program for the remainder of the school year in which their baby is born. The average length of stay is five months.

Young Parents' Center: Intensive support is provided for a limited number of high-risk adolescent mothers who are unable to return to their regular schools or obtain employment. Some participants have been in the perinatal program during their pregnancy and immediately thereafter, while others have received very few support services during pregnancy. Roughly 70 to 80 percent are school dropouts before entering the center. When in full operation, the center has a capacity to serve 140 young mothers and 30 young fathers.

CETA-funded employment activities augment alternative education, health services, counseling, child-care and other related services. A counselor and work supervisor help the young parents to cope with current responsibilities and prepare for work force participation through individual and group counseling and job preparation activities. Students may earn credit for taking part in groups which meet regularly to discuss topics such as coping with the pressures of parenthood, adjusting to new family relationships and roles and setting personal goals. The work supervisor also teaches a class called "Earning and Spending Money," which focuses on consumer education, career exploration, preparation for employment and decision making. Many students are referred to appropriate CETA training and work experience opportunities and others are helped to find employment in the private sector.

A discretionary* grant enabled the Yount Parents' Center to expand its service by hiring a public health nurse to deal with the health problems of the young mothers and their children; hiring a job counselor/developer to work with young fathers; assisting students with transportation to the center and

their worksites; allowing the center to remain open in the summer; providing allowances for 20 subsidized job slots in the community and adding a research component to evaluate the various interventions.

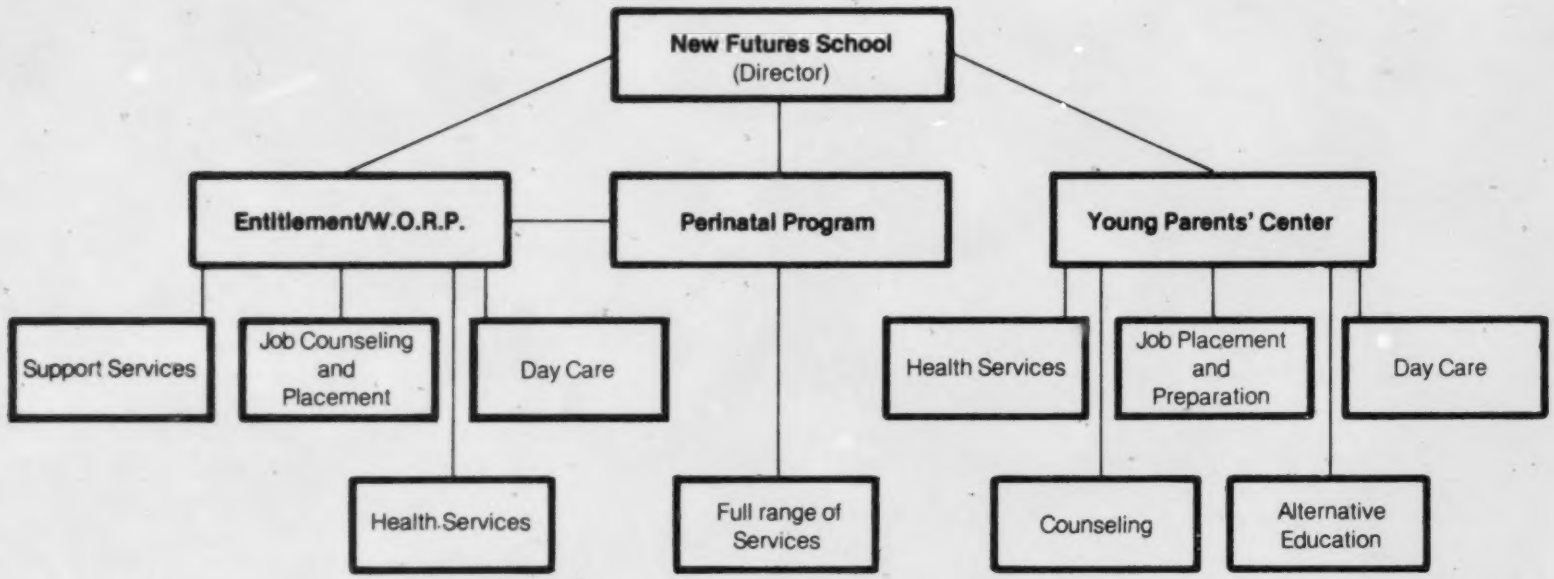
Entitlement Program/WORP: Albuquerque is one of 17 areas in the country selected to operate a Youth Incentive Entitlement Pilot Project (YIEPP), a demonstration program which guarantees part-time work during the school year and full-time work during the summer to increase school retention. Through a special arrangement using funds from the Department of Health and Human Services (formerly HEW) to provide on-site day-care, job counseling and supervision and supportive services, approximately 48 New Futures students

*New Futures School is one of 13 programs selected to receive funds in a national competition focusing on high-risk youth, conducted by Youthwork, Inc., a nonprofit intermediary corporation set up by the Department of Labor.

participate in the Albuquerque YIEPP program, referred to as the Work Opportunities Research Program (WORP). Eligible students interested in working are identified early in the enrollment process and may work up to 20 hours per week.

Administrative and Staffing Requirements:

The relationship between the components of New Futures School can be diagrammed as follows:



The perinatal program has a staff of approximately 25 people who provide a full range of services. Only one staff member is funded by CETA, a receptionist who is a CETA Title VI PSE worker. The Young Parents' Center employs 16 staff: a program coordinator, eight teachers, a part-time child-care director, three care-givers and a secretary, funded primarily from the Albuquerque Public Schools and the New Mexico Department of Vocational Education. A job counselor and work supervisor are funded by CETA Title IV, YETP. A discretionary grant from Youthwork Inc., pays the salary of a public health nurse and a job counselor/developer who works

specifically with young fathers. The WORP component has seven staff: an assistant director, a public health nurse, a job counselor, three care-givers and a secretary. All are funded by the Department of Health and Human Services.

Recruitment/Client Profile:

Over half of the clients in New Futures are Hispanic. Whites are the next largest group at 35 percent, and blacks and Native Americans each account for roughly 5 percent of total participants. Ages range from 13 to 21 years, with close to 80 percent of the students falling in the 15- to 17-year-old bracket. The overwhelming majority of participants are female; however, a small number of young fathers are enrolled in the Young Parents' Center. Over 70 percent of the young parents are single when entering New Futures School, but the percentage of married students in the Young Parents' Center is greater than in other components. Roughly 30 percent of the students in the perinatal program were school dropouts prior to entering New Futures, whereas 70-80 percent of students in the Young Parents' Center were previous dropouts.

Most young parents hear about New Futures by word of mouth from present and past New Futures students. Others are referred by schools, doctors and community agencies. Recruitment also occurs through public service announcements on radio and television, newspaper features and flyers distributed in health clinics, schools, Planned Parenthood offices, laundromats and welfare and food stamp offices.

Outcomes to Date:

Since both the Young Parents' Center and the Entitlement/WORP componenets are new to the school, it is too early to measure outcomes. However the 10-year successful track record of the New Futures perinatal program indicates that favorable results can be anticipated from the new employment components. Past records demonstrate a low number of repeat pregnancies, a high rate of return to school and a low dropout rate within the school.

Problems/Progress:

Maintaining good attendance is a problem, particularly for the Young Parents' Center, since its clients generally have more severe problems. The 40 to 50 percent daily attendance rate at the center is caused in large part by the young mothers' and babies' health problems. It is anticipated that attendance will improve with the addition of a full-time nurse to the staff of the center.

Integrating the roles of teenager, parent, student and worker is not easy. Often students are very interested in obtaining a job immediately to meet income needs but are less interested in education, training and job preparation activities. The staff strongly emphasizes building self-esteem, fostering responsibility and developing an awareness of the importance of preparing to achieve future goals.

CETA income eligibility and verification requirements make it difficult to serve many young parents in the Entitlement/WORP component. Often students in the most dire circumstances are unable to obtain the necessary records to document family income over the previous six months, since their living situations have been very unstable and erratic.

Implementation Hints:

An effective approach to serving pregnant adolescent parents must deal with their many special needs and problems. The impact of excellent job training and work experience is diminished if education, health, child care and other needs go unmet. Counselors and other staff who work with young parents need to be aware of the multiplicity of problems these youth face and establish working relationships with appropriate community agencies to ensure that all of the necessary services are provided.

Child care is probably the single most important need of young parents. Without adequate arrangements for child care, any approach or program is likely to fail. If this provision is not written into the program, staff must work with participants to secure reliable, quality care in the community.

General Comments:

New Futures School is a very complex program to administer; it uses several different funding sources and grants and operates under four different fiscal years. Prime sponsors interested in improving services to young parents should not examine this program as a model to accept or reject in total, but rather focus on those activities and approaches which can effectively be implemented in their own youth programs. The most important lesson to draw from the success of New Futures School, however, is the benefit of serving young parents in a comprehensive and coordinated manner.

Mid-Willamette Valley Consortium, Oregon

YWCA Teen Mother Program

The Teen Mother Program is operated by the Salem (Ore.) YWCA, a private nonprofit agency. Funding of $22,449 comes from CETA Title II-B and the program serves a maximum of 75 participants.

Unique Feature(s) of Program:

Mid-Willamette Valley Consortium funds an employment counselor at the Salem Teen Mother Program to provide employment and training services to pregnant adolescents and young parents. The employment component is an integral part of a comprehensive program which includes: day care, alternative education, parenting education and health and social services. Young mothers and fathers are assisted in activities that range from acquiring a Social Security number and writing a resume to finding and holding a job.

Duration of Grant:

October 1, 1979-September 30, 1980

Major Program Goals and Objectives:

The Teen Mother Program seeks to minimize the health, educational, emotional and economic risks of young parents and pregnant adolescents and to develop the skills and positive attitudes necessary for their future success. An employment counselor helps each participant make decisions, set realistic goals and obtain a job or training position which best meets his or her needs. The counselor plans to place at least 25 young parents into unsubsidized jobs.

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Program Description:

To be eligible for the Teen Mother Program, a person must be 18 or under, pregnant or a care-giving parent (this includes young fathers) and interested in attending the program. Prospective students meet with a counselor at least twice during their first two weeks to develop a program plan which includes formulating a contract to meet minimum requirements in each of the program's five components—social services, education, health, parenting and employment.

Each participant must meet with the employment counselor during the first nine weeks of participation for an initial interview and assessment. The employment counselor assists the students in completing a self-inventory that appraises their needs, accomplishments and short- and long-term goals. A CETA application is completed so the prime sponsor can determine the eligibility of those interested in a CETA training or work experience position. At the minimum, each participant will acquire a Social Security number, obtain a work permit (if under 18) and compile a resume before leaving the program.

The employment counselor works closely with the program's career education teacher, social service counselors and all other staff to deal with the young parents' many barriers to employment. The employment counselor also conducts sessions on values clarification, decision making and consumer issues and provides individual and group counseling, job development and job placement services.

For many participants, placement in a job while they attend the program is not desirable. Nevertheless, students formulate employability development plans and participate in a variety of activities designed to increase future opportunities. They use a computerized career information system, put together resumes, participate in mock interviews, practice filling out job applications and learn how to take advantage of community resources through field trips and guest lectures.

The employment counselor also works with young fathers who are not enrolled in the program but whose partners and children are. Often the counseling takes place after school hours in the individual's home. Primarily, the counselor provides personal and career counseling, job placement and job development services.

Administrative and Staffing Requirements:

Mid-Willamette Valley Consortium funds 80 percent of an employment counselor's time to work with pregnant adolescents and young parents at the Teen Mother Program. There are approximately 25 other staff members, funded by a variety of sources, who comprise the staffs for day care, education and social services.

Recruitment/Client Profile:

Referrals come almost daily from community social service and mental health agencies, the prime sponsor, schools, doctors, the clergy and young women previously or presently enrolled in the Teen Mother program. All of the "active participants" are young women, although young fathers are eligible. Many young fathers and other family members do, however, participate in some activities and receive counseling on occasion. Of the 55 students enrolled as of March 4, 1980, 46 were white, eight Hispanic and one black.

Outcomes to Date:

Halfway through the program year, the employment counselor has certified 27 young women as eligible for CETA, placed five students in CETA training or work experience positions and placed six in part-time unsubsidized jobs in the private sector. The counselor has also worked with six young women who were not students but referred for service and four young fathers whose partners attend the Teen Mother Program. All students have participated in employability development activities.

Problems/Progress:

The consortium's agreement with the Teen Mother Program emphasizes placement of young parents into unsubsidized employment. Placement goals have not been met for a number of reasons. First, many young women choose not to work while they are in the program. In many cases, they are expecting a child or have recently given birth and face the monumental tasks of going to school, taking care of an infant, keeping a home and maintaining a relationship with a partner. Holding a part-time job on top of these responsibilities is often unrealistic and undesirable. Second, for those choosing to work, the barriers are formidable. Many lack appropriate educational and job skills. Obtaining adequate child care and transportation are also big problems. The day-care center at Teen Mothers closes at 2:30 p.m., which makes holding a job after school very difficult.

Some young mothers who are primarily interested in staying home and raising their children are threatened by the title "employment counselor." In these instances, the counselor attempts to support the mother's choice while at the same time exploring with her ways in which some of her needs and goals might be met in an employment setting. Part-time and job-sharing positions are presented as possibilities.

Serving young fathers is difficult. Generally, it is only when they desperately need a job that they are willing to meet with the employment counselor. They are usually receptive to suggestions which will help them find a job but often are reluctant to complete a CETA application and write a resume.

Implementation Hints:

The employment problems of young women are complex to begin with but are compounded by pregnancy and parenthood. Employment counselors need to be aware of the special needs of young parents and the tremendous barriers to employment which they face. To be effective, services must be comprehensive and coordinated. Employment counselors must respond to more than specific employment needs.

Counselors should also realize that placement in a job may be less important and less productive for young parents in the short term than completing their educations and developing employability skills.

Appendix D

Many Questions and a Few Answers for Counselors

Many of the problems young parents or prospective parents face can be addressed through group and individual counseling and the provision of pertinent information. CETA counselors need to develop an awareness of the kinds of information the client group will need as well as a sensitivity to the general fears and concerns involved in early parenting.

Counselors who have worked with young parents cite common questions and concerns which fall roughly into the following categories:

- Legal rights;
- Health;
- Finances;
- Day care;
- Housing;
- Work;
- Marital and social concerns.

Although answers to common questions will vary from locality to locality because of differences in state laws and available services, some questions, especially in the areas of legal rights and health, can be answered with some consistency across jurisdictional boundaries. This section includes answers to some basic legal questions and lists other questions which counselors should be prepared to answer according to local circumstances.

Legal Rights

Several legal questions concerning young parents have been answered through legislation and court cases. These questions involve the issues of privacy rights, the right of unmarried minors to obtain contraceptives, the right to choose abortion without parental consent and the right to an education. Following are some of the legal areas which young parents and pregnant teenagers should know about.

Privacy Rights

"Do I have the right to make my own decision about abortion?"

"Do I have the right to contraception?"

"Privacy rights" in this context refers to the right of an individual to make his or her own decisions on medical care related to sex and pregnancy. In *Planned Parenthood* v. *Danforth,* 428 U.S. 52 (1976), the Supreme Court ruled against the absolute veto parents had over an abortion decision made in the first trimester of their daughter's pregnancy. At present, however, no Supreme Court decision governs self-determination for minors after the first trimester.

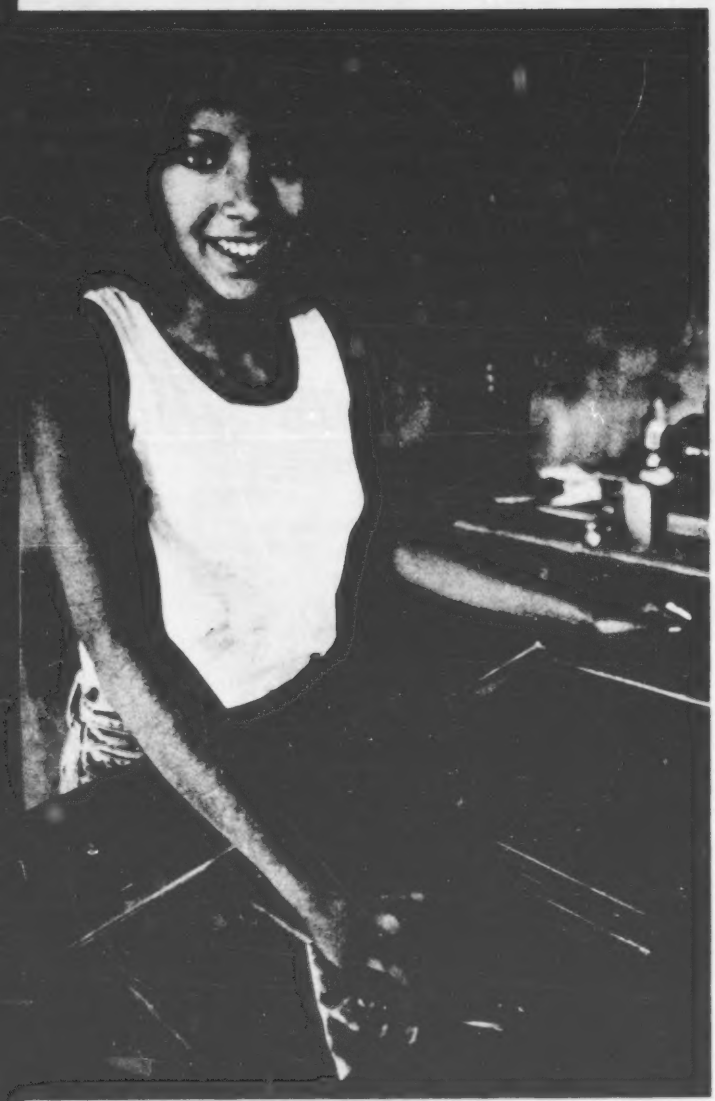
The Supreme Court decision in *Carey* v. *Population Services International,* 431 U.S. 2010 (1977), dealing with a mail order company which sold nonmedical contraceptives, lifted restrictions on the sale of contraceptives to minors. The net effect of both decisions was to extend the privacy rights of minors in sex and pregnancy-related matters. Individual state laws, however, still govern related issues such as age of majority, "emancipated minor" and "mature minor" status, which may affect a pregnant minor's legal rights.

Education

"Do I have the right to stay in school through my pregnancy?"

In the past, public schools have refused pregnant students the right to attend regular classes. Regulations governing Title IX of the Education Amendments of 1972, however, prohibit a system which receives federal funds from discriminating against any student on the basis of pregnancy or pregnancy-related conditions.

Students affected by this rule may not even be placed in a separate portion of the school program unless they request such placement or a physician certifies the student's inability to participate in the regular program.



The provision of any special programs for pregnant students would be governed by state law.

Health

Questions on health will center on pre- and postnatal care, diet, bodily changes during pregnancy and care of the new baby. Although it may be most appropriate to refer pregnant enrollees to medical services, counselors should have at least a basic working knowledge of:

- Common side effects of pregnancy, especially those which may have a direct bearing on the enrollee's ability to work;
- Effects of alcohol, drugs and cigarette smoking on the unborn infant;
- Dietary considerations;
- Basics of medical care for the newborn.

In addition, the CETA counselor should have answers to questions such as:

"What health benefits can I get while participating in work or training under CETA?"

"Do I forfeit the right to medical aid through social services if I am working?"

"Is there a clinic which will provide free or inexpensive care for me and my baby?"

"What about hospital costs?"

In general, counselors should have the resources to help allay fears enrollees may have concerning their health and babies' condition. They should also be able to generate options for medical care.

Finances

"Won't I be better off on welfare?"

Perhaps the most difficult task a CETA counselor will have is to convince a pregnant enrollee or young parent that he or she is better off working than on welfare. To do this, the counselor should have a sound understanding of the types of public or general

assistance available locally and should be familiar with the basic requirements and formulas used to determine the level of assistance. Counselors should be able to explain both short- and long-term advantages of participating in work or training, but with emphasis on how the enrollee can "swing it" now.

"How can I take care of myself and my baby?"

For the young parent, perhaps even more than other youth participants, training in management of personal finances is of paramount importance. Counselors must also be aware of any financial assistance available to young parents or their children.

Day Care

"Who will take care of my baby while I'm in school, training or at work?"

"How can I afford to pay a babysitter?"

"What day-care services are available?"

"Will my baby get the proper care while I'm away?"

Again, generation of options is the key. Besides having knowledge of child-care availability through CETA or other government-funded day-care services, the counselor should be sensitive to the basic fears and concerns young parents might have concerning care of their baby. Visits to day-care centers, information on licensing requirements and meetings with other parents using the day-care services might be helpful. Also, counselors can suggest other options such as building networks of family members, friends and neighbors to swap services such as child care.

Questions for the Local Situation

Other concerns of young parents commonly cited by counselors are in the areas of housing, work, and marital, social and personal concerns. In one way or another, depending on local circumstances, staffing and individual needs, counselors should be prepared to deal with problems and questions of the following types:

Housing

"If my baby and I live with my parents, how does that affect my status in CETA?"

"Where can I get emergency shelter for myself and my child?"

"Can I afford to rent an apartment on my own?"

"How do I find my own place?"

Work

"Can I work while I'm pregnant? How long?"

"Will I be able to hold my job even though I'll need to take some time off before and after I have the baby?"

"Will being a parent reduce my chances of finding a job?"

"Do I have to tell my employer that I'm a parent? What if he/she asks?"

Marital, Social and Personal Concerns

"I'm different from others my age. How will schoolmates, co-workers and others treat me?"

"Where can I get help with marital problems?"

"How can I relate to my parents, now that I'm a parent?"

Most of these questions have no easy answers. Counselors working with young parents may find themselves acting as brokers for services and will need to develop a strong sense of their clients' many needs and concerns. Low socioeconomic status is often accompanied by adherence to traditional values and roles. The counselor should be aware that many CETA-eligible young women may automatically assume that work and pregnancy or motherhood are mutually exclusive. The introduction of a role model who will work with the prospective parent might be particularly effective at this point.

SESAME STREET
SESAME STREET

Appendix E
Interviews with Selected Experts
Daphne Busby

Sisterhood of Black Single Mothers

Daphne Busby is the director and founder of the Sisterhood of Black Single Mothers, a self-help organization for adult and teen single parents located in Brooklyn, New York. The Sisterhood started six years ago when a group of single mothers formed a supportive network to assist other mothers experiencing similar problems but lacking necessary information and resources. In contrast to a grassroots beginning where the initial "sisters" used their own money and resources to undertake advocacy activities, the Sisterhood currently has over 300 members and receives funds from several public and private sources, including the Ford Foundation and the New York State Division for Youth. Recently, the Sisterhood received a grant from Youthwork Inc., a nonprofit intermediary, set up by the Department of Labor to develop an employment component to augment existing activities.

Interview

The Sisterhood began with adult mothers helping other adult single mothers. At what point did you begin dealing with the problems of teenage pregnancy and parenthood and what approach has been most successful?

The issue of teenage pregnancy and parenthood is something we've been concerned with from the very beginning. We knew many teenagers that did not have the kind of family or community support and involvement that provided the information and assistance necessary to learn how to be good mothers as well as how to grow as young women. Very informally, without calling it "a program," we began counseling young women about education options, making contacts and referrals, providing information and helping them navigate around some of the red tape involved in receiving services.

A key feature of our current program is the sister-to-sister approach in which an adult member of the Sisterhood is carefully matched with a young mother. The big sister provides counseling, support and advocates for the interests and needs of the younger sister. Most importantly, however, what we (adult sisters) represent to the young mothers, which I see as a large gap in many programs popping up, is a positive role model. It is easy to tell a young mother what she should do, should have done, can do and can't do, but it is more effective for her to see how someone has managed to deal with a similar situation. It's not just painting a rainbow at the end of the road; it's being able to see how the stones are dealt with as you go down the road.

The girls that we work with learn how to take control of their lives, deal with conflict, deal with problematic systems, advocate for themselves, and they learn how to be their children's mothers and not be totally devastated by that.

How does the Sisterhood deal with the issue of child care?

One of the myths I want to dispel is that teenage mothers do not want to go to school. They come here in droves wanting to go to school. The attitude about young mothers going on welfare as a cop-out is not really accurate. That happens after disappointment after disappointment after disappointment. That's when you see them falling back and resigning themselves to something else.

If you look a little closer and talk to the young mother, you often find that she has been to many of the programs, sought much of the available information and has continually met with the same results: "You can do all of these things if you have child care." The gap for teenage parents is child care. Anyone who talks about activities and programs for teenage parents without looking at this issue and putting something reasonable

within their reach to deal with it is giving the young parent a pipe dream. We know it to the point where we put a child-care component in everything we do.

In our sister-to-sister project we provide a stipend of $30 a week. We use the stipend approach so the girls' families are eligible to be child-care providers. This allows the young mother to be a contributer to her family instead of a liability as many girls begin to feel. It also allows mothers and grandmothers who are already home to earn some extra money. In cases where the families are not able to help, the big sisters assist the young women to find quality child-care arrangements. A cooperative babysitting service is also available. Women in the Sisterhood babysit for each other in exchange for skills and services.

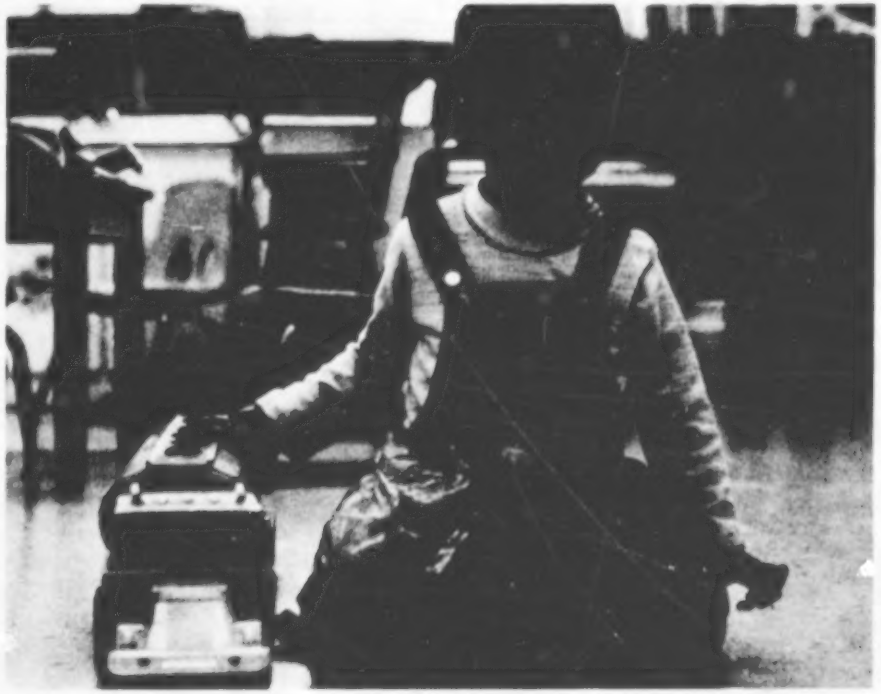
Do you have advice for CETA counselors who frequently work with young parents?

One of the main things they need to do is examine their expectations and reassess their views about young parents. We in the Sisterhood have been very vocal about trying to change the "pathological perspective" toward dealing with young parents. Are they all promiscuous? The answer is no! Many times it was their first experience and pregnancy resulted. It is they who are new to the experience who are most unfamiliar with birth control.

The issue of teenage pregnancy has been studied to death, but not many people have gotten close enough to know the inner workings. Many young women, from the very first instance when they discovered they were pregnant, have met with nothing but opposition from family and friends. Often the relationship with their boyfriend has been severed because of the pregnancy. Despite the negative consequences, so very often the young women do not act humbly. They don't say, "My God, what have I done? This is a mistake." They become a little hardened and say, "That's all right. I'm gonna keep my baby! I'm gonna do what I have to do, and I don't really need anybody!" These things are said, not because they are so self-assured or so cocky, but because they demonstrate that piece of human dignity people muster to survive. They fight it off. This is a very healthy sign *if* it is handled properly and recognized for what it is.

The counselor must be the kind of person that the young girl in trouble can feel free to talk to. He or she must realize that the pregnant teenager or young parent faces some heavy things and because of her unique situation other problems will arise. Counselors need to get close without turning the young person off and that's not easy.

Photo by Gail W. Steward, Baltimore Mayor's Office of Manpower Resources



Recently the Sisterhood was awarded a grant from Youthwork Inc., a nonprofit intermediary set up by the Department of Labor. What employment activities will this grant fund?

The grant from Youthwork Inc. will allow us to move our total program one step further by providing training and work experience for 30 young people. These young people will still continue to participate in all of our other activities, which is an added benefit, because when that program ends they will not be dropped like a hot potato because the funds ran out. The Sisterhood is still here. They will be part of that network.

The program basically involves training in driver education, but it is more than driver education in the traditional sense. We are talking about empowering young people with abilities they can use on many different levels. Many jobs in the area are driving-related and will afford the young parent more ability to control his or her work hours. By the end of the program, young people will obtain their licenses and have some knowledge about auto mechanics. We will also develop a pickup van service where participants will gain needed work experience and assist them in finding unsubsidized jobs when the program nears completion.

Stephen Kaiser

Baltimore Consortium

Stephen Kaiser is a public information officer for the Baltimore Consortium. The consortium operates a large youth program with a budget of nearly $11 million to serve approximately 8,000 young people in fiscal 1980 (excluding the Summer Youth Program). Baltimore is also one of 17 areas in the country to operate a Youth Incentive Entitlement Pilot Project (YIEPP), a demonstration program which guarantees part-time work during the school year and full-time work during the summer to increase school retention. This program has about 7,000 young people on board.

In its YIEPP program and in its alternative education program for youth, the consortium has made special efforts to respond to the needs of young parents. (See page 19 and 35 for a description of Baltimore Consortium's programs for young parents.)

Interview

The issue of child care is a very important consideration for prime sponsors. The Baltimore Consortium does not provide child care in its adult programs and only on a limited basis in its youth programs. For what reason have you [Baltimore Consortium] taken this approach?

One good reason. We don't have the money. We're caught between a rock and a hard place. The kids in our programs need child-care and they need other support services, but we have to make a decision. Do we provide comprehensive and very intense support services and employment and training services to a few or do we provide more superficial employment and training services to as many as possible? What we've tried to do is strike a balance between those two extremes. The other thing we try to do is identify services in the community that are outside the CETA system and use them whenever possible.

In our adult programs we decided not to provide child care. We thought that in our youth programs it was perhaps more important because young people not only have trouble finding child care but have trouble coping with the responsibilities of being a parent, a student, an employee and a young person—all at the same time. The adults, we feel, may have child-care needs but they are more mature and a little more capable of identifying resources outside the CETA system on their own. With adults, we like to concentrate our money as much as possible on training and employment.

The CETA system places a strong emphasis on placement rates. Do you find that factor an impediment to working with youth that experience the most serious

employment handicaps and require a range of support services?

It hasn't been a discouragement. For example, in the programs that do provide day care, the young parents that we are serving, our target group, are young parents whether we like it or not. We could choose to provide day care or not to provide day care. By having day care, however, I think we've helped our placement rate rather than hindered it. We have even found that when students graduate from Harbor City Learning (Baltimore's large CETA alternative education program) they are searching for outside sources of day-care and are very careful about the arrangements they choose. They come back to us and say, "I've found these sources; can you help me determine what would be best for my child?" The major difficulty is that we do not have enough money to provide nearly all the support services that are needed.

How does the Baltimore Consortium integrate an emphasis on particular target or special needs groups into the context of a comprehensive CETA program?

We really don't have a particular approach. What we do have is a fairly extensive and well known outreach system in the city, that reaches the entire CETA-eligible population. We do have a couple of programs that are designed for specific target groups, but generally we are able to reach high-risk youth such as offenders, the handicapped and young parents through our regular outreach system.

We have subcontracted all of our decentralized intake centers. We have 15 in the metropolitan area. We feel that established community organizations that already have credibility in the many individual communities will have the most success in reaching the CETA-eligible population. The Greater Homewood Community Corporation, for example, is much better known among the residents of Homewood than the Mayor's Office of Manpower Resources. It is also viewed as a part of the local community, whereas if we were to go in there it might be perceived as City Hall coming in and telling people what to do and what not to do.

Caroline Gaston

New Futures School

Since 1971, Caroline Gaston has been program coordinator for New Futures School, a comprehensive program for pregnant adolescents and young parents in Albuquerque, New Mexico. Beginning 10 years ago as a small program of the YWCA with an enrollment of two students, New Futures School currently operates under the auspices of the Albuquerque public school system with active assistance from New Futures Inc., a non-profit community based organization, and serves nearly 300 young parents in daily enrollment. It is one of the few programs of its kind that uses CETA funds to provide employment services to young parents (see pages 20 and 38 for a description of New Futures School.)

Interview

Could you capsulize the major needs and problems of pregnant teenagers and young parents and highlight the primary factors CETA program operators should consider when developing programs for these young people?

It is very hard to generalize because some young women have greater needs in some areas versus others. While the girl is pregnant, her health is usually her primary concern. Teenage pregnancy poses high health risks for the mother and the baby. There are also many follow-up health problems that diminish employment prospects.

Dealing with educational needs is critical. Teenage pregnancy is the greatest single cause of school dropouts. That in turn is a predictor of AFDC dependence.

The girl's attitude about herself is also a primary

concern. Self-confidence is very important. She needs to decide that the pregnancy is not the end of the world and set goals for the future.

Low self-confidence is one of the factors we believe may lead to the pregnancy in the first place. This is compounded when all the messages from society tell the teenage mother that she is going to be a poor parent. Society also says that you can't be a successful parent and also work.

It's hard for the teenage mother to settle in her own mind how she can be a successful mother and enter the employment market at the same time. There needs to be a great deal of counseling and education about ways parenting and work can go together.

Finally, the day-care problem must be solved. This is one area that any teenage parent program and in particular CETA programs need to examine. CETA can provide day care, and CETA workers can be trained and employed as day-care providers.

What about communities where there are no comprehensive service programs like New Futures School, where a prime sponsor funds a specific employment component? How can prime sponsors best respond to the needs of young parents in this situation?

In any community, some group always has to take the lead in getting a teenage parent program started, and it can begin in a variety of ways, depending on where the power is and where the interest is. The CETA prime sponsor can bring together people from the health community, education community, social service community and other areas. Each organization has to say we'll provide such and such a service. CETA funds can be effectively used for basic education, counseling, health services and child care if the money is used as part of a comprehensive program.

I absolutely stress the comprehensiveness. In many communities each agency is seeing this girl here, that girl there, but they don't ever see each other or know what the other is doing. Coordinating with other service providers is essential.

What do you think accounts for the high rates of teenage pregnancy and parenthood in the country?

There are many reasons. Just spend an afternoon listening to the songs on popular radio or an evening watching prime-time television. The message that kids are getting is that extramarital sex is okay; it's cute, it's funny, it's glamorous and it's romantic.

By their very nature young people are risk takers. We have driver education and yet they drive too fast. We have all sorts of health education programs, yet kids drink and smoke too much. They think it just won't happen to them. If I were to poll the girls in our program, at least half would say, "Just that once or twice, I didn't think it would happen to me."

Photo courtesy New Futures School, Albuquerque, N.M.

Photo courtesy New Futures School, Albuquerque, N.M.

Some young girls genuinely don't know how the body works. Maybe they knew they should use birth control but didn't know how to use the device or were afraid that their parents would find out.

Others may have at least a subconscious if not conscious desire to become pregnant, because that situation looks better to them than their present state. Maybe for some it represents the rite of passage to adulthood, and for others it's a way to demonstrate independence or get back at their parents—part of the whole teenage rebellion.

And many girls are not strong enough emotionally to say no to the guy.

There are just so many reasons for the trends and it's very frustrating for me. I would never want to run a family planning program and guarantee that I could cut pregnancy rates. I do know, however, that we can cut repeat pregnancy rates. We have done that at New Futures. Overall, however, our society doesn't do a very good job teaching young people what it means to be a parent.

Appendix F
Recommended References

General References

Teenage Pregnancy and Family Impact: New Perspectives on Policy
Theodora Ooms and Teresa Maciocha
Family Impact Seminar
George Washington University, Washington, D.C.
1979

The Family Impact Seminar, a program of George Washington University's Institute for Educational Leadership, was established in 1976 to test the feasibility of assessing the effects of public policies on families. This preliminary report presents a succinct overview of issues and policies related to teenage pregnancy. It also summarizes the findings in nine papers commissioned as part of the seminar's research.

This publication can be obtained through:
The Family Impact Seminar
1001 Connecticut Avenue N.W.
Washington, D.C. 20036
202/296-5330

Adolescent Pregnancy and Childbearing: Growing Concerns for Americans
Wendy H. Baldwin
The Population Bulletin
Volume 31, Number 2
The Population Reference Bureau, Inc., Washington, D.C.
May 1977

This publication provides a concise review of the data on adolescent pregnancy and related topics such as contraceptive behavior, abortion, male involvement and adoption. It contains many excellent statistical tables.

This publication can be obtained through:
The Population Reference Bureau, Inc.
1337 Connecticut Avenue N.W.
Washington, D.C. 20036
202/785-4664

Teenage Motherhood: Social and Economic Consequences
Kristin A. Moore et al.
The Urban Institute, Washington, D.C.
January 1979

Teenage Motherhood provides in-depth information on the problems resulting from adolescent pregnancy and examines the long-range effects of teenage pregnancy on future labor force participation and annual earnings.

This publication can be obtained through:
The Urban Institute
2100 M Street N.W.
Washington, D.C. 20037
202/223-1950

Adolescent Sexuality in a Changing American Society
Catherine Chilman
HEW Publication Number NIH 79-1426
U.S. Department of Health, Education and Welfare,
Washington, D.C.
1978

This publication is a comprehensive discussion and review of research on adolescent sexuality, including an extensive bibliography.

This publication can be obtained through:
U.S. Government Printing Office
North Capitol Street N.W.
Washington, D.C. 20402
202/783-3238

Unplanned Parenthood: The Social Consequences of Teenage Childbearing
Frank Furstenberg Jr.
The Free Press, New York City, New York
1976

Unplanned Parenthood gives an account of the social, economic and psychological consequences of teenage pregnancy. It presents the results of a comparative study between teenage mothers and fathers, their parents and children and a control group of nonparents.

This article can be obtained through your local library.

"School Age Pregnancy and Sex Education"
Options in Education
National Public Radio and George Washington University, Washington, D.C.
1979

Options in Education, a public radio program, has issued transcripts of a six-part series produced by National Public Radio and the Institute for Educational Leadership, George Washington University. The booklet contains several interviews with experts in the field as well as young parents, who describe their experiences, feelings and unmet needs.

This publication can be obtained through:
Options in Education
Public Radio, Program Number 220
2025 M Street N.W.
Washington, D.C. 20036
202/783-6462

11 Million Teenagers: What Can Be Done About the Epidemic of Adolescent Pregnancies in the United States
The Alan Guttmacher Institute, New York City, New York
1976

This booklet, published by the Planned Parenthood Federation of America, provides excellent statistical data on adolescent sexuality, pregnancy and childbearing. It gives information on what is being done to provide services for and to educate young parents. It also proposes a national program to cope with the epidemic of teenage pregnancy. An updated version will be published soon.

This publication can be obtained through:
The Alan Guttmacher Institute
515 Madison Avenue
New York City, New York 10022
212/752-2100

"Design Problems in Evaluating Service Programs for School-Age Parents"
Lorraine Klerman
Evaluation and the Health Professionals
Volume 2, Number 1
Sage Publications, Inc., Beverly Hills, California
Spring 1979

Problems associated with the evaluation of programs for school-age parents are identified in this paper through critical analysis of published studies of program accomplishments.

This article can be obtained through:
Sage Publications, Inc.,
275 South Beverly Drive
Beverly Hills, California 90212
213/274-8003

For Staff Providing Direct Services to Young Parents

The Ecology of Help-Seeking Behavior Among Adolescent Parents
Kristina Cannon-Bonventre and Janet R. Kahn
American Institutes for Research, Cambridge, Massachusetts
January 1979

This publication is a result of a study of 100 black, Hispanic and white teenage parents. The issues addressed in this study are the problems and needs of young parents, including their experiences with and feelings about "helping networks." The purpose of this study was to fill a gap in the knowledge about teenage parenthood, specifically teenage parents' own definitions of acceptable sources and forms of help.

This publication can be obtained through:
American Institutes for Research
22 Hilliard Street
Cambridge, Massachusetts 02138
617/661-6180

Teenage Father (film)
Children's Home Society of California, Los Angeles, California
1978

This half-hour documentary drama relates the innermost thoughts and feelings of several young men who are involved as unmarried teenagers in unplanned pregnancies.

This film can be obtained through:
The Children's Home Society of California
5429 McConnell Avenue
Los Angeles, California 90066
213/390-8954

Ethical and Legal Issues in Teenage Pregnancy
Margaret O'Brien Steinfels
Family Impact Seminar
George Washington University, Washington, D.C.
1979

This paper gives an overview of recent policy decisions on the privacy rights of adolescents in relation to pregnancy and sex-related medical care and contraception. The ethical question of whether the adolescent is old enough to make decisions of such magnitude (i.e., contraception, abortion) without parental consent is also addressed.

This publication can be obtained through:
The Family Impact Seminar
1001 Connecticut Avenue N.W.
Washington, D.C. 20036
202/296-5330

Improving Teenage Mothers' Ability to Compete for Jobs
Steven P. Schinke et al.
Social Work Research and Abstracts
Volume 14, Number 3
National Association of Social Workers, Inc., Washington, D.C.
Fall 1978

This paper is an evaluation of two training approaches designed to increase the job interview skills of teenage mothers.

This article can be obtained through:
National Association of Social Workers, Inc.,
Publication Sales Office
1425 H Street N.W., Suite 600
Washington, D.C. 20005
202/628-6800

Working with Childbearing Adolescents
Caroline Gaston et al.
New Futures, Inc., Albuquerque, New Mexico
1979

This book is aimed at adults from a variety of professions who are working with pregnant teenagers. It covers areas such as adolescent development and sexuality, potential conflicts between adolescent development and parenting responsibilities, maternal-infant bonding and service intervention strategies for young parents. It also contains an extensive bibliography which includes audiovisual and other materials appropriate for use with pregnant teenagers.

This publication can be obtained through:
New Futures, Inc.
2120 Louisiana N.E.
Albuquerque, New Mexico 87110
505/883-5680

National Directory of Child and Youth Services-1979
Child Protection Reports, Washington,D.C.
1979

The directory contains the names, addresses and telephone numbers of program managers and information sources in over 3,000 counties and major cities and state agencies, for social services, health and mental health services and juvenile court/youth advocacy services. Readers can easily locate the people who run child protection services, foster care, day-care, adoption programs, family planning and maternal and child health programs. Key personnel involved in the management of federal children and youth programs are also listed.

This Publication can be obtained through:
CPR Directory Services Co.
1301 20th Steet N.W.,
Washington, D.C. 20036
202/785-4055

For Pregnant Adolescents and Young Parents

A Part of Our Lives
Cathy Fleming et al.
Origins, Inc., Salem, Massachusetts
1977

This publication focuses on sexuality and birth control.

What Now: Under 18 and Pregnant
Linda Carroll et. al.
Origins, Inc., Salem, Massachusetts
1976

This booklet focuses on the pregnant teenager's legal rights, options and needs in reference to school attendance, medical care, abortion and adoption.

Both of the above publications through:
Origins, Inc.
P.O. Box 2087
Salem, Massachusetts 01970
617/745-5873

Teenage Pregnancy: A New Beginning
Linda Barr and Catherine Monserrat
New Futures, Inc., Albuquerque, New Mexico
1978

This publication is written specifically for the expectant teenage mother. It provides a wealth of easy-to-understand information on topics such as: human reproduction, pre- and postnatal health care, nutrition, decision making, feeling and concerns, hospital procedures, family planning concepts and advice for young fathers.

This publication can be obtained through:
New Futures, Inc.
2120 Louisiana N.E.
Albuquerque, New Mexico 87110
505/883-5680

Note: There may be a charge to obtain some of the above publications. Please check with the source listed before requesting copies.

Appendix G

60 Federal Programs Related to Adolescent Pregnancy and Parenthood

There are over 35 separate federal programs in five federal departments—HHS, Labor, Agriculture, HUD and Defense—that provide either direct or indirect support for activities for pregnant adolescents, young parents and their children. The many programs have not arisen out of a "grand design;" rather, they have developed independently over a period of several years. They are often uncoordinated on both the federal and local levels.

In some instances, prime sponsors might be able to use other sources of federal funding to supplement CETA services or pool resources with other community agencies serving young parents. The approach to obtaining funds will vary with each program. Programs are funded in several ways:

- Categorical grants to state and local governments;
- Formula funds to states;
- Short-term grants to state and local governments;
- Short-term grants to community based organizations.

As with CETA, certain programs have administrative officials at the regional, state and local levels. Below is a list and brief description of several relevant programs and administering agencies organized by topic areas.

Sources: Government Polices Related to Teenage Family Formation and Functioning: An inventory Paper Prepared for the Family Impact Seminar by Kristin A. Moore

Department of Health, Education and Welfare Task Force on Teenage Pregnancy Report to Secretary Califano, September 1977

Program	Administering Agency	Description
Social Services and Day Care		
Title XX of the Social Security Act	Office of Program Integration and Review, Office of Human Development Services, Department of Health and Human Services (formerly HEW), 200 Independence Avenue, S.W., Washington, D.C. 20201, 202/472-7257 (for information)	Provides federal funds to states on a formula basis at a matching rate of 75 percent, except for family planning services (90 percent) and child care (100 percent). Services provided under Title XX include day care, family counseling, supportive services and family planning. Day care accounts for the largest expenditure. States have a large degree of flexibility in deciding which services are provided to whom.
Day Care and Social Services (Title IV-A of the Social Security Act)	Administration for Children, Youth and Families, Office of Human Development Services, Department of Health and Human Services, 330 C Street, S.W., Washington, D.C. 20201, 202/245-0222.	Provides assistance to people who are receiving AFDC or who are eligible for AFDC but for some reason are not receiving benefits. Federal funds assist states in paying for day care and other social services.
Child Welfare Services (Title IV-B of the Social Security Act)	Administration for Children, Youth and Families, Office of Human Development Services, Department of Health and Human Services, 400 Sixth Street, S.W., Washington, D.C. 20202, 202/755-8888.	Awards formula grants to state welfare agencies to assist in establishing, extending and strengthening child welfare services. This title provides unrestricted funds to states so day care can be funded under the title.
Social Services for Work Incentive (WIN) Program participants. (Title IV-C of the Social Security Act)	Jointly funded and administered by the Employment and Training Administration (DOL) and the Office of Human Development Services (HHS), Office of Work Incentive Programs, 601 D Street, N.W., Room 5102, Washington, D.C. 20213, 202/376-7030.	Provides social services for WIN job trainees. Day care is one of the major services provided. All recipients are eligible.
Child Abuse (Child Abuse Prevention and Treatment Act of 1975)	National Center on Child Abuse and Neglect, Administration for Children, Youth and Families, Office of Human Development Services, Department of Health and Human Services, 400 Sixth Street, S.W., Washington, D.C. 20201, 202/755-0593.	Funds grants and contracts to state, local and voluntary agencies to stimulate and improve the prevention and treatment of child abuse and neglect.
Income Security		
Aid to Families with Dependent Children (Title IV-A of the Social Security Act)	Office of Family Assistance, Social Security Administration, Department of Health and Human Services (formerly HEW), Room B404, 2100 Second Street, S.W., Washington, D.C. 20024, 202/245-2000.	Provides funds on an open-ended entitlement basis to states for a share of cash payments made to eligible families. The program is administered by state and local governments with each state setting its own eligibility criteria for its program. The program covers needy children under 18 (21 if in school) who are

Program	Administering Agency	Description
		deprived of the support and care of one parent through continued absence, incapacity or death or, at the state's option, the unemployment of the father.
		Provision of family planning services is required to be offered to both Medicaid and AFDC recipients, including minors who can be considered to be sexually active.
Health Services and Family Planning		
Maternal and Child Health (Title V of the Social Security Act)	Office of Maternal and Child Health, Bureau of Community Health Services, Department of Health and Human Services, 5600 Fishers Lane, Rockville, Md. 20857, 301/443-2170.	Provides formula grants to states. Typically, funds go to state health departments, which establish or provide funds to clinics to improve health services, especially in rural and low-income areas. Services may be provided regardless of the income of the recipient. Not less than 6 percent of the formula grant in each state is to be spent on family planning.
Title X of the Public Health Service Act	Office for Family Planning, Bureau of Community Health Services, Department of Health and Human Services, Room 6-17, 5600 Fishers Lane, Rockville, Md. 20857, 301/443-2430.	Awards grants for the support of family planning services. Title X funds are allocated to the 10 regional offices of HHS. The regional offices award grants to individual providers such as hospital clinics, health departments, planned parenthood facilities, neighborhood health centers and private nonprofit agencies. Services are provided to anyone who desires family planning services but who would not otherwise have access to them.
Medicaid (Title XIX of the Social Security Act of 1965, as amended)	Health Care Financing Administration, Department of Health and Human Services, 200 Independence Ave., S.W., Washington, D.C. 20201, 202/245-0923.	Provides funds on an open-ended entitlement basis to states for the provision of health care services to the low-income population. The program is administered by state and local governments with each state designing its own program and having substantial flexibility concerning eligibility, benefit levels and scope of coverage. States participating in the program are required to provide medical assistance to all recipients of AFDC cash assistance. In addition, states may provide coverage to all children under 21 from low-income families, regardless of welfare status or program eligibility. It is mandatory for states to provide family planning services to cash assistance recipients.

Program	Administering Agency	Description
Special Program for Pregnant Adolescents and Young Parents		
Adolescent Pregnancy Initiative (Title VI, VII, VIII of the Health Services and Centers Amendments of 1978)	Office of Adolescent Pregnancy Programs, Public Health Service, Department of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201, 202/472-9093.	Provides funds to assist in the establishment of networks of community-based services for adolescents at risk of unintended pregnancies, for pregnant adolescents and for adolescent parents. Title VI of the law provides for grants to public and private nonprofit organizations and agencies which deliver comprehensive services or coordinate the provision of such services. Title VII calls for the coordination of federal programs and policies related to adolescent pregnancy. Title VIII authorizes an independent study evaluating the effectiveness of existing programs.
Nutrition		
Special Supplemental Food for Women, Infants and Children.	Department of Agriculture, Supplemental Food Programs Division, 201 14th and Independence Avenue, S.W., Washington, D.C. 20250, 202/447-8206.	Provides funds to state health departments, or their equivalent, to provide food supplements to women who are pregnant, postpartum up to six months, on breast feeding up to 12 months and to children up to age five who are determined to be at nutritional risk. Pregnant teenagers represent a significant proportion of the clients for this program.
Commodities Supplemental Food Program	Department of Agriculture, Supplemental Food Programs Division, 201 14th and Independence Avenue, S.W., Washington, D.C. 20250, 202/447-8206.	Provides surplus agricultural products to women who are pregnant, postpartum or breast-feeding and infants or children who are eligible for benefits in federal, state or local food, health and welfare programs and who are determined by a physician or other designated person in need of the nutrients in the supplemental food. Mothers and children up through age six can receive food from 41 projects in 13 states.
Education		
Vocational Education: State Programs Including Consumer and Homemaking Education (Vocational Education Act of 1963, as amended)	Department of Education, Room 5652, R.O.B. 3, Seventh and D Streets, S.W., Washington, D.C. 20202, 202/472-3440.	Provides training for youth and adults to increase their occupational skills and their ability to compete in the labor market. State programs include basic grants, program improvement and supportive services, special programs for the disadvantaged and consumer and homemaker education. Approaches to the adolescent problems of pregnancies and parenthood include child-

Program	Administering Agency	Description
		care modules for teaching parenting skills and teaching nutrition and parenting in home economics classes.
Adult Education (Title III of P.L. 91-230 as amended)	Department of Education, Room 5056, R.O.B. 3, Seventh and D Streets, S.W., Washington, D.C. 20202, 202/245-2278.	Promotes the establishment of public education programs which provide adults with the opportunity to achieve basic and secondary level education competency, including training leading to meaningful employment.
Education for Parenthood (Titles I and III of the Elementary and Secondary Education Act)	Department of Education, 400 Maryland Avenue, S.W., Washington, D.C. 20202, 202/245-8118.	Provides funds to local school districts. The program funds education for parenthood programs to provide students with knowledge in parenting and child development and offers direct experience in working with young children.
Employment		
Work Incentive Program (WIN)	Jointly funded and administered by the Employment and Training Administration (DOL) and the Office of Human Development Services (HHS). ETA: 601 D Street, N.W., Washington, D.C., 20213, 202/376-6366.	Provides employment training, job referral and supportive services for members of households receiving AFDC. Many WIN registrants receive training through other programs such as CETA.
Comprehensive Employment and Training Act (CETA) as amended in 1978)	Employment and Training Administration, Department of Labor, 601 D Street, N.W., Washington, D.C. 20213, 202/376-6366.	Provides job training and employment services leading to increased employment opportunities and self-sufficiency for disadvantaged, unemployed and underemployed persons. Although Title IV of the act is a separate youth title, young people may also be served under comprehensive services (Title II-B), upgrading and retraining (II-C), national programs (III), public service employment (II-D and VI) and the Young Adult Conservation Corps (VIII).

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